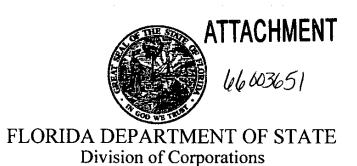
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2006 8:00 am Secretary of State

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DOCUMENT #P05000054980 1. Entity Name FALCON AERONAUTICS, INC.								02-13-200	06 90041 002 [:]	***158./5	
Principal Place of Business Mailing Address						·	-1 '		. noE1		
6102 SEMINOLE GARDEN CIRCLE PALM BEACH, FL 33418			TOTAL THEM DESCRIPT L				6600365 1				
ļ							I MARTINE I	D 03121 UMA 0117 YUM 10	rii Pelel O ffin Atlan Lanek (2017	PR/1901 (2 1902	
2. Principal Place of Business 4327 SOUTH HIGHW						AY #27					
Suite, Apt. 4, etc. SUITE NUMBER 404						. 2474	01222006	Chg-P	CR2E034 (11/0	5)	
City & State CLEF				RMONT, FLORIDA 34711			FEI Numb	3421995		Applied For Not Applicable	
Zip		Country		Zip	Cou	ntry	5. Certificate	of Status Desired	\$8.75 / Fee Ragu	Additional ired	
	6. Name	and Address of C	current R	legistered Agent		T	7. Name and	d Address of New F			
<u> </u>						Name					
Strei 432								YNES, ES HIGHWAY		····-	
ROTAL FALMBEACH; FL-33414						SUI.	TE NUMB	ER 404			
						City CLE	RMONT,	FLORIDA	34711 Zp C	ode	
R. The shows	namori enti	ly submits this state	ement for	the purpose of changi	nn its reniste	red office or regis	starest agent of bi	oth, in the State of Fi	orida. I em tamillar wi	th, and accept	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
	Dr. 10 M Okumak										
SIGNATURE.	Signature, 19990	or printed name of registe		d tile if applicable.	PACITE: Register	ed Agent argheture rect.	ired when reinstating)		DATE		
FILE NOWIL FEE IS \$150.00 9. Election Campaign Financing \$5,00 May 8e After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.											
10.		OFFICE	S AND D	DIRECTORS	11		ADDITIONS	LICHANGES TO GE	TICERS AND DIRECTO	DOS IN 11	
TITLE	PRES		107110	□ Deleta	III.		20011014	JONATOLO TO ON	☐ Chang		
NAME	MEREDI	TH, JAMES			NAU	ME					
STREET ADDRESS 6102 SEMINOLE GARDEN CIRCLE						LEET ADORESS					
CITY-\$1-70P	PALM BE	ACH, FL 33418				Y-ST-20P					
TITLE	İ			☐ Deleta	TIT	-			Chang	Addition a	
STREET ADDRESS	l					EET ADDRESS					
CITY-ST-ZIP	<u> </u>				αт	Y-ST-ZIP					
TITLE				Odice	m	-	-		Chang	e Addition	
NAME STREET ADDRESS	1				NA.	WE NEET ADORESS					
CITY-ST-ZIP						Y-S1-ZIP					
TITLE				☐ Deleta	111	ut			Charg	e Addition	
HAME	1				KAU						
STREET ADDRESS CITY-ST-ZIP	İ					Y-SI-ZIP					
TITLE	1	·····	_	☐ Delete	100	LE CONTRACTOR			☐ Chang	# Addition	
NAME					NA.	1					
STREET ADDRESS CITY-SI-ZIP	\					EET ADORESS Y-SI-ZIP					
mu	 			☐ Delete	113				☐ Chang	e Addition	
NAME					NAI						
- STREET ACCRESS						TEET ADORESS					
C11Y-51-21P				<u>.</u>		Y-\$1-@P			····		
indicated of the co	d on this repo processon or	ort or supplemental the receiver or trust	report is se empo	this filing does not gut true and accurate and wared to execute this r its all other like emocra	that my sign: apon as requ	ature shall have t	he same lecal effe	ict as if made under	oath; that I am an offi	cer or director	
indicated of the co changed	d on this repo procession or d, or on an at	ort or supplemental the receiver or trust tachment with an ed	report is see empor adross, w	true and accurate and wered to execute this r ith all other like empov	that my sign: apon as requ	ature shall have t	he same legal effe	ict as if made under les; and that my nam	oath; that I am an offi se appears in Block 16	cer or director	
indicated of the co	d on this repo procession or d, or on an at	ort or supplemental the receiver or trust tachment with an ed	report is see empor adross, w	true and accurate and wered to execute this ?	that my sign: aport as requ verad.	ature shall have t uired by Chapter	he same legal effe	ict as if made under	oath; that I am an offi se appears in Block 16	cer or director 0 or Block 11 if	



February 16, 2006

FALCON AERONAUTICS, INC. 2736 MISTY OAKS CIRCLE ROYAL PALM BEACH, FL 33411

Subject: FALCON AERONAUTICS, INC.

Reference Number:

P05000054980

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH ANNUAL REPORTS SECTION