2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041229

Entity Name: MAVANA HELI SUPPORT USA, INC.

18890 S.W. 264TH STREET

HOMESTEAD, FL 33031

Address: City-St-Zip: FILED Apr 12, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:		
11930 S.W MIAMI, FL	V. 128TH STREE 38186	ĒΤ			11930 S.W. 128TH STRE MIAMI, FL 33186	EET	
Current Mailing Address:					New Mailing Address:		
PO BOX 3 WARNER	081 , QUEENSLAND	, 4500 .	AU		PO BOX 4036 CALOUNDRA, QL 4551	AU	
FEI Number	: 26-2682103	FEI Number Ap	oplied For ()	FEI Num	nber Not Applicable()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
	ROBERT C ' 264TH ST. 33031 US						
	named entity su e of Florida.	bmits this sta	tement for the p	urpose of	f changing its registered o	ffice or registered agent, or both,	
SIGNATU	RE:						
Electronic Signature of Registered Agent				ent	Date		
Election Car	mpaign Financing 1	Trust Fund Con	tribution ().				
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DCEO () D CHEYNE, LEIGH 11930 SW 128TH MIAMI, FL 33186				Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	DP () D CHAMBERLAIN, F 11930 SW 128TH MIAMI, FL 33186	IST.			Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name:	S (X) D OWENS, ROBER	Pelete T C ASST			Title: () Name:	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RHYS CHAMBERLAIN MR 04/12/2009