## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000062881

Entity Name: GOLDEN WINGS AVIATION, CORP.

FILED Apr 24, 2009 Secretary of State

Current F	Principal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
401 SW 1 PEMBRO	47 AVE KE PINES, FL 33027			
Current N	Mailing Address:	New Mailing Address:	New Mailing Address:	
401 SW 1 PEMBRO	47 AVE KE PINES, FL 33027			
FEI Number	r: 26-2904823 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Des	ired ( )	
Name and	d Address of Current Registered Agen	t: Name and Address of New Registered Agen	Name and Address of New Registered Agent:	
The above	47 AVE KE PINES, FL 33027 US	the purpose of changing its registered office or registered age	nt, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered	d Agent Date		
Election Ca	mpaign Financing Trust Fund Contribution $(\ )$			
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND I	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) Delete MARTIN, ANGELA 401 SW 147 AVE PEMBROKE PINES, FL 33027	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VP ( ) Delete VILLAREAL, ANTONIO 401 SW 147 AVE PEMBROKE PINES, FL 33027	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		

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.

SIGNATURE: ANGELA MARTIN P 04/24/2009