

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000006492

FILED
Apr 29, 2004
Secretary of State

Entity Name: AIRCRAFT TECHNICIAN MAINTENANCE CORP.

Current Principal Place of Business:

16155 SW 117TH AVE
SUITE 13
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

16155 SW 117TH AVE
SUITE 13
MIAMI, FL 33177

New Mailing Address:

FEI Number: 65-0385383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAMOS, EDGARDO
110 SW 108 AVE., #5
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

RAMOS, EDGARDO
110 SW 108 AVE.,
APT. # H-5
MIAMI, FL 33174 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

04/29/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: RAMOS, EDGARDO
Address: 110 SW 108 AVE.,
City-St-Zip: MIAMI, FL 33174

Title: P () Delete
Name: RAMOS, HERMAN
Address: 15021 S.W. 145TH COURT
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: RAMOS, JULIO
Address: 14373 SW 161 STREET
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: RAMOS, EDGARDO
Address: 110 SW 108 AVE., APT. # H-5
City-St-Zip: MIAMI, FL 33174

Title: P (X) Change () Addition
Name: RAMOS, HERNAN
Address: 15021 S.W. 145TH COURT
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HERNAN RAMOS

Electronic Signature of Signing Officer or Director

P

04/29/2004

Date