2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000057886

Entity Name: MIG AVIATION CORP.

1855 NW 19 ST

PEMBROKE PINES, FL 33029

Address:

City-St-Zip:

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2100 W 76 ST #403 HIALEAH, FL 33016 **New Mailing Address: Current Mailing Address:** 2100 W 76 ST #403 HIALEAH, FL 33016 US FEI Number: 65-0510314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIBERTARIO, COKIERKOPF 2100 W 76 ST #403 HIALEAH, FL 33016 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: () Change () Addition LIBERTARIO, COKIERKOPF Name: Name: 2100 W 76 ST #403 Address: Address: City-St-Zip: HIALEAH, FL 330165504 City-St-Zip: () Delete Title: TD Title: (X) Change () Addition PRESTAN, MIGDALIA E ALVARADO, MIGRALIA Name: Name:

Address:

City-St-Zip:

18552 NW 19 ST

PEMBROKE PINES, FL 33029 US

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: MIGDALIA E. PRESTAN TD 04/29/2005