2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2004
Secretary of State

DOCUMENT# P95000011268

Entity Name: TROPICAL AVIATION GROUND SERVICES, INC.

Current Principal Place of Business:

17400 SW 48TH ST
FORT LAUDERDALE, FL 33331 US

New Principal Place of Business:

Current Mailing Address:

17400 SW 48TH ST
FORT LAUDERDALE, FL 33331 US

New Mailing Address:

FEI Number: 65-0560150 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADILI, RONNIE
8801 PARADISE DRIVE
FORT LAUDERDALE, FL 33321 US

Name and Address of New Registered Agent:

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:

Title: DP ( ) Delete
Name: ADILI, MIRMOHAMMAD
Address: 17400 SW 48TH ST
City-St-Zip: FT LAUDERDALE, FL 33331

Title: DST ( ) Delete
Name: ADILI, MIRYAHYA
Address: 8801 NW 61ST ST
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: DVP ( ) Delete
Name: ADILI, MIRMASOOD
Address: 8801 NW 61ST ST
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: DVP ( ) Delete
Name: ADILI, ALLEN
Address: 8801 N N 61ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MIRMOHAMMAD ADILI D/P 04/17/2004

Electronic Signature of Signing Officer or Director Date