2006 FOR PROFIT CORPORATION

May 01, 2006 8:00 am Secretary of State **ANNUAL REPORT** 05-01-2006 90340 009 ***150.00 **DOCUMENT # P95000044477** 1. Entity Name SUN-COR AIR CARGO SERVICE, INC. 40072718 Principal Place of Business Mailing Address 8621 MANASSAS ROAD 8621 MANASSAS ROAD TAMPA, FL 33635 TAMPA, FL 33635 04242006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3318819 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent FUCHS, ISER I DO NOT WRITE 8621 MANASSAS ROAD TAMPA, FL 33635 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE FUCHS, CORRINE B NAME 8621 MANASSAS ROAD STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33635 TITLE NAME FUCHS, ISER STREET ADDRESS 8621 MANASSAS ROAD CITY-ST-ZIP TAMPA, FL 33635 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if of the corporation or the changed, or on an attachn

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED