

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

02-17-2006 90079 017 ***150.00

DOCUMENT # P95000047166 1. Entity Name PTS AVIATION, INC.	
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Principal Place of Business 3505 N.W. 82ND AVENUE MIAMI, FL 33122 US	Mailing Address 3505 N.W. 82ND AVENUE MIAMI, FL 33122 US
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66004962



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0590067	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SILVERMAN, STEVEN
 9500 S DADELAND BLVD
 STE 550
 MIAMI, FL 33156

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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 _____ (NOTE: Registered Agent signature required when representing) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D	NAME ELKAYAM, RAPHAEL
STREET ADDRESS 8855 NW 35TH LN	
CITY - ST - ZIP MIAMI, FL 33172	
TITLE NAME	
STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	
STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	
STREET ADDRESS CITY - ST - ZIP	
TITLE NAME	
STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Raphael Elkayam* _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____



ATTACHMENT

66004962

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2006

PTS AVIATION, INC.
3505 N.W. 82ND AVENUE
MIAMI, FL 33122 US

Subject: PTS AVIATION, INC.

Reference Number: **P95000047166**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION