

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000085878

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: EXPEDITED AVIATION SERVICES, INC.

**Current Principal Place of Business:**

8004 NW 90 ST  
MEDLEY, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

8004 NW 90 ST  
MEDLEY, FL 33166

**New Mailing Address:**

FEI Number: 65-0896012

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEVY, NOHRA  
5403 NW 109 CT  
MIAMI, FL 33178 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: PVST ( ) Delete  
Name: LEVY, NOHRA  
Address: 7826 NW 53 ST  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: LEVY, NOHRA  
Address: 8004 NW 90ST  
City-St-Zip: MEDLEY, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NOHRA LEVY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PVST

04/26/2007

\_\_\_\_\_  
Date