## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000107643

Title:

Name:

Address:

City-St-Zip:

FORT LAUDERDALE, FL 33324

AMATY, DENNIS

558 WESTREE LANE

FILED Jan 05, 2006 Secretary of State

Entity Na	me: BROW	ARD AVIATION SERVICES	SINC.				
Current Principal Place of Business:			New Prin	New Principal Place of Business:			
SUITE 108	15TH AVE 5 O BEACH, F	L 33069					
Current M	lailing Addı	ress:	New Mai	New Mailing Address:			
SUITE 108	15TH AVE 5 O BEACH, F	L 33069					
FEI Number	: 65-0895218	FEI Number Applied For (	) FEI Number Not Ap	plicable ( )	Certificate of Status Desired	( )	
Name and	d Address o	f Current Registered Agei	nt: Name an	Name and Address of New Registered Agent:			
SUITE 109 POMPANO The above	15 TH AVE 5 O BEACH, F e named entit e of Florida.	L 33069 US ty submits this statement for	the purpose of changing	ı its registe	red office or registered agent, or	r both,	
	Electr	onic Signature of Registere	d Agent		Date		
Election Ca	mpaign Finand	cing Trust Fund Contribution (	).				
OFFICER	S AND DIRE	ECTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VP MURRAY, JA 10867 NW 9 CORAL SPR		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition , JAMES PRINGS WAY PRINGS, FL 33076		
Title: Name: Address: City-St-Zip:	VP PINE, TIM 2632 NE 26 <sup>-</sup> LIGHTHOUS	( ) Delete TH AVE. E POINT, FL 33064	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title:	VP	( ) Delete	Title:	VP	(X) Change ( ) Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DENNIS AMATY VΡ 01/05/2006

(X) Change ( ) Addition

AMATY, DENNIS 3866 WOODSWALK BLVD

LAKE WORTH, FL 33467