2009 UNIFORM BUSINESS REPORT (UB	(R)
DOCUMENT # \$ 99 000031725	
1. Entity Name Aviation Services Ine.	FILED LUKETARY OF STATE LISION OF CORPURATIONS
Principal Place of Business Mailing Address	00 OCT 18 PM 3:47
15609 NW 5 Street	111 01 47
Pembeuke Pines, FL 33028	
2. Principal Place of Business 5 5t 3. Mailing Address 15609 NW 5	st
Suite, Apt. #, etc.  Suite, Apt. #, etc.	DO NOT WRITE IN THIS SPACE
Pembloke lines tembroke line	4. FE Number 09/0583 Applied For Not Applicable
33028 COUNTYSA 33028 COUNTRY	5. Certificate of Status Desired
6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
- Agmes - Jarvis - Name	Ismael Obaydi
Street	Address (P.O. Box Number is Not Acceptable)————————————————————————————————————
Ph 1	
Copal Gables, FC 33134 City	Pembroke Pines FL 193828
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.	
SIGNATUFE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent sign	nature required when reinstating)  QATE
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)  Make Check Payable to Department	\$550,00 Trust Fund Contribution.
11. PSTD OFFICERS AND DIRECTORS 12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE ISMAEL Obayd: Delete NAME	70000344150°7-4ditie
STREET ADDRESS 15609 NW 5 St. STREET ADDRESS	-10/27/0001015019 s ************************************
TITLE Penbeoke Pines, 17 33028 CITY-ST-ZIP	Change Addition
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13. I hereby certify that the information supplied with this filling does not qualify 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 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 gotherstee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if	
changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 10/1/00 954-751-0020	

## INTERNATIONAL ACCOUNTING CONSULTANTS, INC. 5545 S.W 8 STREET SUITE 105 MIAMI, FLORIDA 33134

September 14, 2000

Florida Department of State
Division of Corporations
co Uniform Business Report Fillings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Reference: 2000 UBR for IO Aviation Services Inc., Document #P99000031725.

Dear Sir(s),

Our firm prepares the taxes, financial statements and related business documentation for the above-mentioned corporation which includes the annual report.

This year our offices were robbed and some of the documents were lost and (or) stolen. Unfortunately, the UBR 2000 for IO Aviation Services was one of those documents missing. The confusion has caused the client to file late. If you search through IO's records, you'll find the company is new and the officers were not aware of the filing requirements or the time frame. Due to these unforeseen circumstances of which my client is not at fault, I respectfully request the penalty be waived. I have attached the regular filling fee and give my sincerest apology.

Thank you,

Richard F. Toro

President