2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V26018

Title:

Name:

Address:

City-St-Zip:

DS

FURGANG, FRED

() Delete

12824 SW 108TH AVENUE

MIAMI, FL 331765404

FILED Jan 18, 2006 Secretary of State

Entity Name: APT AVIATION, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	OMAT PKWY OD, FL 33019	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
1100 DIPLOMAT PKWY HOLLYWOOD, FL 33019 US						
FEI Number:	65-0322460	FEI Number Applied For ()	El Number Not Appli	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
PLOUCHA, L.M. 100 SE 3RD AVENUE STE 400 FORT LAUDERDALE, FL 33394 US			100 SE 3RÎ STE 1400	PLOUCHA, L.M. 100 SE 3RD AVENUE STE 1400 FORT LAUDERDALE, FL 33394 US		
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:				01/18/2006		
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$		
Title: Name: Address: City-St-Zip:	DP () DPLOUCHA, L.M., 1100 DIPLOMAT HOLLYWOOD, FI		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DT () C SCHLAFLY, FREI 13250 SW 97 TE MIAMI, FL		Title: Name: Address: City-St-Zip:	DT (X) Change () Addition SCHLAFLY, FRED E 13250 SW 97 TERRACE MIAMI, FL 33186		
Title: Name: Address: City-St-Zip:	DVP () D TIRADO, VINCEN 18601 SW 210TH MIAMI, FL 33187	STREET	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition BATTLE, TIMOTHY A 10061 S W 57 COURT PINECREST, FL 33156		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: L.M. PLOUCHA PRES 01/18/2006

() Change () Addition