


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 14 PM 4:20

| | |
|---|---|
| DOCUMENT # V66787 1. Entity Name MIAMI AIR MECHANICAL, INC. |  |
|---|---|

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|--|--|
| Principal Place of Business 7805 NORTH WEST 55 STREET MIAMI, FL 33166 US | Mailing Address 7805 NW 55TH STREET MIAMI, FL 33166 US |
|--|--|

DO NOT WRITE IN THIS SPACE



01052006 No Chg-P CR2E034 (11/05)

| | |
|---|--------------------------------|
| 4. FEI Number 65-0361713 | 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

GOLDMAN, DAVID E
2630 NE 203RD STREET STE 103
NORTH MIAMI, FL 33180

DO NOT WRITE
IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and the filer (applicable). (NOTE: Registered Agent signature required when re-instating)

| | |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|--|

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP JOFFEE, MICHAEL S. 3230 ROSEWOOD COURT FORT LAUDERDALE, FL 33328 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DS LLOSENT, EDUARDO 7301 SW 80 COURT MIAMI, FL 33143 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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03/03/06--01037--018 **200.00

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 a l other like empowered.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

2/17/06