

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 829668

Entity Name: AIRCLAIMS INC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

7270 NW 12TH ST
800
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

7270 NW 12TH ST
800
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 52-0808636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEGAS, PABLO
7270 NW 12TH ST
STE 800
MIAMI, FL 33126 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: C () Delete
Name: HUNTER, MARK
Address: CARDINAL POINT NEWALL RD
City-St-Zip: HOUNSLOW, TW, TW UK

Title: ST () Delete
Name: VEGAS, PABLO
Address: 7270 NW 12TH ST STE 800
City-St-Zip: MIAMI, FL 33126

Title: CEO () Delete
Name: FORSYTH, KEN
Address: 7270 NW 12TH ST SUITE 800
City-St-Zip: MIAMI, FL 33126

Title: VP () Delete
Name: GARCIA, WILLIAM
Address: 7270 NW 12TH ST SUITE 800
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PABLO VEGAS

ST

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date