2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003858

Entity Name: AIR SUNSHINE INTERNATIONAL, INC.

FILED Apr 03, 2009 Secretary of State

SAN JUAN INTERNATIONAL AIRPORT TERMINAL B SAN JUAN INTERNATIONAL AIRPORT TERMINAL B

XXXX, XX

SAN JUAN, PR 00937

Current Mailing Address: New Mailing Address:

PO BOX 37698 PO BOX 37698

SAN JUAN PR 00937, XX SAN JUAN, PR 00937 PR

FEI Number: 66-0710596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ADILI, MIRMOHAMMAD 17400 SW 48TH ST

SW RANCHES, FL 33331 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:

Electronic Signature of Registered Agent Date

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

Title: CDPS () Delete ADILI, MIRMOHAMMAD Name: 17400 SW 48TH STREET Address:

City-St-Zip: SW RANCHES, FL 33331

Title: () Delete ADILI. MIRMOHAMMAD Name: 17400 SW 48TH STREET Address: SW RANCHES, FL 33331 City-St-Zip:

Title: () Delete SUAREZ, MADONNA Name: 17400 SW 48TH STREET Address: City-St-Zip: SW RANCHES, FL 33331

Title: VΡ () Delete ADILI, MIRYAHYA Name: Address: 17400 SW 48TH STREET City-St-Zip: SW RANCHES, FL 33331 SW RANCHES, FL 33331 US (X) Change () Addition VΡ

SUAREZ, MADONNA Name: 17400 SW 48TH STREET Address: City-St-Zip: SW RANCHES, FL 33331 US

CDPS

Title: VΡ (X) Change () Addition

ADILI, MIRMOHAMMAD

ADILI, MIRMOHAMMAD

17400 SW 48TH STREET

17400 SW 48TH STREET

SW RANCHES, FL 33331 US

ADILI, MIRYAHYA Name: Address: 17400 SW 48TH STREET City-St-Zip: SW RANCHES, FL 33331 US

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: MIRMOHAMMAD ADILI **CDPS** 04/03/2009