

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000001958

**Entity Name:** AIRESPRING, INC.

**Current Principal Place of Business:**

6060 SEPULVEDA BLVD.  
STE. 220  
VAN NUYS, CA 91411

**Current Mailing Address:**

6060 SEPULVEDA BLVD.  
STE. 220  
VAN NUYS, CA 91411

**FEI Number:** 95-4862910

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title PDST  
Name LONSTEIN, AVI  
Address 6060 SEPULVEDA BLVD., STE. 220  
City-State-Zip: VAN NUYS CA 91411

Title DVP  
Name LONSTEIN, TONY CHARLES  
Address 6060 SEPULVEDA BLVD., STE. 220  
City-State-Zip: VAN NUYS CA 91411

Title VP  
Name LONSTEIN, DANIEL  
Address 6060 SEPULVEDA BLVD., STE. 220  
City-State-Zip: VAN NUYS CA 91411

I hereby 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 all other like empowered.

**SIGNATURE:** AVI LONSTEIN

**PRESIDENT**

**01/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date