

**2018 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F12000000662

**Entity Name:** AERO MEDICAL INTERNATIONAL, INC.

**Current Principal Place of Business:**

1745 NW 51 PLACE, HANGAR 73  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

2101 WEST COMMERCIAL BLVD  
SUITE 5100  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 45-4120531

**Certificate of Status Desired:** No

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

HAYMAN, STUART  
2101 WEST COMMERCIAL BLVD  
SUITE 5100  
FORT LAUDERDALE, FL 33309 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:** STUART HAYMAN

**04/16/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           TROIANO, JOHN  
Address        489 FIFTH AVENUE  
                  19TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title           DIRECTOR  
Name           BROWN, ANDREW  
Address        489 FIFTH AVENUE  
                  19TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title           CEO  
Name           HAYMAN , STUART  
Address        2101 WEST COMMERCIAL BLVD  
                  SUITE 5100  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           DIRECTOR  
Name           SCHELL, SHANNON  
Address        2101 WEST COMMERCIAL BLVD  
                  SUITE 5100  
City-State-Zip: FORT LAUDERDALE FL 33309

Title           DIRECTOR  
Name           RICCI, KENNETH  
Address        355 RICHMOND ROAD  
                  #8  
City-State-Zip: CLEVELAND OH 44143

Title           DIRECTOR  
Name           ROSSI, MICHAEL  
Address        355 RICHMOND ROAD  
                  #8  
City-State-Zip: CLEVELAND OH 44143

*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:** STUART HAYMAN

**CEO**

**04/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date