

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001027

**Entity Name:** AEROVIAS BETA CORP.**Current Principal Place of Business:**AVENIDA AQUILINO DE LA GUARDIA NO. 8  
PANAMA, REPUBLIC OF PANAMA, XX**Current Mailing Address:**AVENIDA AQUILINO DE LA GUARDIA NO. 8  
PANAMA, REPUBLIC OF PANAMA, XX XX**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLORIDA COMPANY REGISTRY INC.  
10 EDGEWATER DRIVE  
#4C  
CORAL GABLES, FL 33133 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	PD
Name	EFROMOVICH, GERMAN
Address	RUE ALBUQUERQUE LINS NO. 1128, APTO 151
City-State-Zip:	SANTA CECILIA,SAO PAULO,SP, XX

Title	TD
Name	CAMPOS, RAUL
Address	RUA PROFESSORA HELOISA CARNEIRO, 21 JARDIM
City-State-Zip:	AEROPORTO, SAO PAULO,SP,BRAZ XX

Title	SD
Name	EFROMOVICH, JOSE
Address	RUA COLUMBUS 282, VILA LEOPOLDINA 05304-
City-State-Zip:	010 SAO PAULO, BRAZIL XX

Title	ASSISTANT SECRETARY
Name	FREED, OWEN S
Address	10 EDGEWATER DRIVE, #4C
City-State-Zip:	CORAL GABLES FL 33133

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:** OWEN S. FREED

AS

03/08/2014

Electronic Signature of Signing Officer/Director Detail

Date