

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 383825

Entity Name: MIAMI AIR LEASE, INC.

FILED
Sep 29, 2008
Secretary of State**Current Principal Place of Business:**13350 NW LE JUENE ROAD
SUITE #5
MIAMI, FL 33054**New Principal Place of Business:**8845 SW 27 ST
MIAMI, FL 33165**Current Mailing Address:**5401 SW 184TH WAY
MIRAMAR, FL 33029**New Mailing Address:**8845 SW 27 ST
MIAMI, FL 33165

FEI Number: 59-1421271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:RONNY, ACLUCHE
5401 SW 184 TH WAY
MIRAMAR, FL 33029 US**Name and Address of New Registered Agent:**ALPIZAR, EVELIO
8845 SW 27TH STREET
MIAMI, FL 33165 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: EVELIO ALPIZAR

09/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: ACLUCHE, RONNY
Address: 5401 SW 184TH WAY
City-St-Zip: MIRAMAR, FL 33029Title: PD () Delete
Name: EVELIO, ALPIZAR
Address: 8845 SW 27TH STREET
City-St-Zip: MIAMI, FL 33165**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: ALPIZAR, EVELIO
Address: 8845 SW 27TH STREET
City-St-Zip: MIAMI, FL 33165Title: () 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: EVELIO ALPIZAR

PD

09/29/2008

Electronic Signature of Signing Officer or Director

Date