

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 383825

FILED  
Jan 03, 2012  
Secretary of State

Entity Name: MIAMI AIR LEASE, INC.

**Current Principal Place of Business:**

5600 NW 36TH STREET  
SUITE 503  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 996548  
MIAMI, FL 33299 US

**New Mailing Address:**

FEI Number: 59-1421271

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BRUNO SARTORI CPA  
275 COMMERCIAL BLVD.  
207  
LAUDERDALE BY THE SEA, FL 33308 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: DUBE, MARK  
Address: 5600 NW 36TH STREET SUITE 503  
City-St-Zip: MIAMI, FL 33166 US

Title: DVP  
Name: PROIETTI, VALTER  
Address: 5600 NW 36TH STREET SUITE 503  
City-St-Zip: MIAMI, FL 33166 US

Title: DT  
Name: SARTORI, BRUNO  
Address: 5600 NW 36TH STREET SUITE 503  
City-St-Zip: MIAMI, FL 33166 US

Title: CEO  
Name: DUBE, MARK  
Address: 5600 NW 36TH STREET SUITE 503  
City-St-Zip: MIAMI, FL 33166 US

Title: CFO  
Name: SARTORI, BRUNO  
Address: 5600 NW 36TH STREET SUITE 503  
City-St-Zip: MIAMI, FL 33166 US

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: MARK DUBE

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01/03/2012

Electronic Signature of Signing Officer or Director

Date