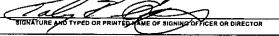
2008 FOR PROFIT CORPORATION

FILED.

ANNUAL REPORT				Apr 28, 2008 08:00 A		
DOCUMENT # 645810 PROJECT AND ADDRESS OF THE PROJECT MANAGEMENT CORP.					Secre	etary of State
AEROJE	T MANAGEMENT CORP.					
2324 BELLE	ce of Business EVUE AVE EXT CH, FL 32114 US	Mailing Address 2900 BELLEVUE AVE DAYTONA BCH, FL 32114	US			IIGI ASAM BIANI ASAMTAK IK IBAN
C	OO NOT WRITE	CE	01072008 4. FEI Number 59-19534 5. Certificate of	No Chg-P CR2E	034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent	1			
EPLING, ROBY R 2657 SLOW FLIGHT DR. DAYTONA BCH, FL 32124				-	NOT WRITI HIS SPACE	
·			o ,			
8. The above	enamed entity submits this statement for the tions of registered agent.	e purpose of changing its register	ed office or register	red agent, or both,	in the State of Florida. I am	familiar with, and accept
	•	Me				
SIGNATURE.	Signature, typed or printed name of registered agent and t	tle il applicable (NOTE: Registere	d Agent signature required	d when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees		,
10.	OFFICERS AND DIF	ECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD EPLING, ROBY R. 2657 SLOW FLIGHT DRIVE DAYTONA BEACH, FL			·		3
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS EPLING, MARIA 2657 SLOW FLIGHT DR. DAYTONA BCH, FL					-021 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO N	NOT WRIT	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP]	IN T	HIS SPACI	E
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP TITLE NAME STREET ADDRESS



4-21-08 Dale

Daylime Phone #