

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 8:00 am
Secretary of State

03-20-2006 90015 022 ***150.00

DOCUMENT # 834496 1. Entity Name LLOYD AEREO BOLIVIANO, S.A.			
Principal Place of Business 225 SE FIRST STREET MIAMI, FL 33131		Mailing Address 225 SE FIRST STREET MIAMI, FL 33131	
2. Principal Place of Business Aeropuerto Wilstermann		3. Mailing Address Suite, Apt. #, etc. PO Box 132	
City & State Cochabamba		City & State MIAMI	
Zip 06000	Country Bolivia	Zip 33131	Country FL
4. FEI Number 59-1595897		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HEYDASCH, AXEL SUNTRUST INTERNATIONAL CENTER ONE SE 3RD AVENUE, SUITE 1860 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Heydasch, Axel Street Address (P.O. Box Number is Not Acceptable) 100 N. Biscayne Blvd., Ste. 2100 City Miami FL Zip Code 33132	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Axel Heydasch DATE March 10 '06 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE RMGR	NAME SANTOS, MARCELO	TITLE RMGR	NAME Santos, Marcelo
STREET ADDRESS 3400 CORAL WAY #600	CITY - ST - ZIP MIAMI, FL 33145	STREET ADDRESS 225 SE First St	CITY - ST - ZIP Miami, Florida 33131
TITLE PD	NAME ARBUN, ERNESTO	TITLE PD	NAME Arbun, Ernesto
STREET ADDRESS 3400 CORAL WAY #600	CITY - ST - ZIP MIAMI, FL 33145	STREET ADDRESS 225 SE First St	CITY - ST - ZIP Miami, Florida 33131
TITLE NAME	STREET ADDRESS CITY - ST - ZIP	TITLE NAME	STREET ADDRESS CITY - ST - ZIP
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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.			
SIGNATURE: Marcelo Santos DATE March 10 '06 (305) <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			



03102006 Chg-P CR2E034 (11/05)

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