

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851369

FILED
Mar 30, 2010
Secretary of State

Entity Name: ASTAR AIR CARGO, INC.

Current Principal Place of Business:

1200 BRICKELL AVENUE
16TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1200 BRICKELL AVENUE
16TH FLOOR
MIAMI, FL 33131

New Mailing Address:

FEI Number: 99-0187465 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD
Name: DASBURG, JOHN H
Address: 1200 BRICKELL AVENUE, 16TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: D
Name: BLUM, RICHARD
Address: 909 MONTGOMERY STREET, STE. 400
City-St-Zip: SAN FRANCISCO, CA 94133

Title: P
Name: DOYLE, STEPHEN P
Address: 1200 BRICKELL AVENUE, 16TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: V
Name: HAMMES, GARY L
Address: 7310 TURFWAY ROAD
City-St-Zip: FLORENCE, KY 41042

Title: D
Name: KLEIN, MICHAEL
Address: 2001 K STREET, NW, SUITE 206
City-St-Zip: WASHINGTON, DC 20006

Title: CFO
Name: DODD, STEPHEN
Address: 1200 BRICKELL AVENUE, 16TH FLOOR
City-St-Zip: MIAMI, FL 33131

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: STEPHEN DODD

CFO

03/30/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date