

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004996

FILED
Feb 16, 2009
Secretary of State

Entity Name: AEROTHRUST CORPORATION

Current Principal Place of Business:

5300 N.W. 36TH STREET
MIAMI, FL 33152

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522236
MIAMI, FL 33152

New Mailing Address:

FEI Number: 52-2338838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CEO () Delete
Name: RISK, JOHN
Address: 10940 WILSHIRE BLVD., SUITE 1600
City-St-Zip: LOS ANGELES, CA 90024

Title: SVPF () Delete
Name: HERNANDEZ, MARLENE
Address: 150 OCEAN LANE DR. #5F
City-St-Zip: KEY BISCAYNE, FL 33149

Title: P () Delete
Name: KALHIL, FARYT
Address: 1471 STILLWATER DR.
City-St-Zip: MIAMI BEACH, FL 33141

Title: SVPS (X) Delete
Name: LEON, JOSE
Address: 13560 SW 111 AVE.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SVPS (X) Change () Addition
Name: LEON, JOSE
Address: 13560 SW 111 AVE.
City-St-Zip: MIAMI, FL 33176

Title: () 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: MARLENE HERNANDEZ

SVPF

02/16/2009

Electronic Signature of Signing Officer or Director

Date