2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F01000005854

Address:

City-St-Zip:

2437 N.W. 97TH AVENUE

MIAMI, FL 33172

FILED Apr 21, 2005 Secretary of State

Entity Name: AEROCAV INTERNATIONAL INC. **Current Principal Place of Business: New Principal Place of Business:** 2437 NW 97TH AVE MIAMI, FL 33172 **Current Mailing Address: New Mailing Address:** 2437 N.W. 97TH AVENUE MIAMI, FL 33172 FEI Number: 65-1092037 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LORD & IGLESIAS ACCOUNTING & BUS. CONSULT 13501 S.W. 128ST S-208 MIAMI, FL 33186 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SADOVNIK, ABA SADOVNIK, ABA Name: Name: URB BELLO MONTE URB BELLO MONTE Address: Address: City-St-Zip: CARACAS, VENEZUELA, City-St-Zip: CARACAS, VENEZUELA, -

Title: DC Title: () Delete (X) Change () Addition POSSAMAI, ANTONIO Name: Name: POSSAMAI, ANTONIO **ORIPOTO** LAS MESETAS DE SANTA ROSA Address: Address: CARACAS, VENEZUELA, City-St-Zip: City-St-Zip: CARACAS, VENEZUELA, -Title: Title: () Delete (X) Change () Addition COGOLLOS, REINALDO COGOLLOS, REINALDO Name: Name: LAS URBINA LAS URBINA Address: Address: City-St-Zip: CARACAS, VENEZUELA, City-St-Zip: CARACAS, VENEZUELA, -Title: (X) Delete Title: () Change () Addition ESQUIVEL, JUAN CARLOS Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: POSSAMAI, ANTONIO DC 04/21/2005