


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # F01000005854 1. Entity Name AEROCAR INTERNATIONAL INC.	
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Principal Place of Business 2437 NW 97TH AVE MIAMI, FL 33172	Mailing Address 2437 N.W. 97TH AVENUE MIAMI, FL 33172
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DO NOT WRITE IN THIS SPACE



01152007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1092037	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

**TONY VALDES CPA PA
2550 NW 72 AVE
SUITE 111
MIAMI, FL 33122-1247**

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOMEZ, LEOPOLDO H URB LOS NARANJOS CARACAS, VENEZUELA, -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC POSSAMAI, ANTONIO R LAS MESETAS DE SANTA ROSA CARACAS, VENEZUELA, -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COGOLLOS, REINALDO LAS URBINA CARACAS, VENEZUELA, -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, S MORALES, VERONICA 7516 NW 112 PL DORAL, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RECIO, EDWARD 5524 NW 114TH AV. #203 DORAL, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/06/07-80075-014 150.00

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: VERONICA MORALES MANAGING DIRECTOR **01/29/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #