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Secretary of State

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4/14

2005 FOR PROFIT CORPORATION - ANNUAL REPORT

DOCUMENT # F04000003322

1. Entity Name
AEROLANE, LINEAS AEREAS NACIONALES DEL ECUADOR, S.A.

66018561

02112005 Chg-P CR2E034 (10/03)

Principal Place of Business	Mailing Address
EDIFICIO RUMINAHUI AVENIDA AMAZONAS Y PASAJES GUAYAS E 3-131 QUITO ECUADOR, OC	6500 NW 22 AVENUE MIAMI, FL 33122

2. Principal Place of Business	3. Mailing Address
Edificio Las Camaras	
Suite, Apt. #, etc. Torre Institucional Piso 7	Suite, Apt. #, etc.
Avenida Francisco Orellana entre Victor Hugo Sicouret	City & State y Miguel Alcivar
Zip: Guayaquil Country: ECUADOR	Zip Country

4. FEI Number: 98-0383677 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MONTESINOS, PABLO
6500 NW 22 STREET
MIAMI, FL 33122

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C RIVERA, XAVIER EDIFICIO RUMINAHUI QUITO ECUADOR,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GM Naranjo, Maximiliano EDIFICIO LAS CAMARAS - TORRE INSTITUCIONAL PISO 7 - AV. FRANCISCO ORELLANA ENTRE VICTOR HUGO SICOURET	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC ALTGELT, JOSE EDIFICIO RUMINAHUI QUITO ECUADOR,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RIEMANN SCHWARZ, CARL F EDIFICIO RUMINAHUI QUITO ECUADOR,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUERERRO, RICARDO EDIFICIO RUMINAHUI QUITO ECUADOR,	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARDITO, BRUNO EDIFICIO RUMINAHUI QUITO ECUADOR,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCEO RIVERA, XAVIER EDIFICIO RUMINAHUI QUITO ECUADOR,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ MARCH 21 2005
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #