## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000002526

Entity Name: LINEA AEREA SAPSA CHILE, S.A., INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1951 N.W. 68TH AVE., BLDG. #3-706, STE 237 1665 N.W. 79TH AVENUE

MIAMI, FL 33122 MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

1951 N.W. 68TH AVE., BLDG. #3-706, STE 237 P. O. BOX 59-2875 MIAMI, FL 33122 P. O. BOX 59-287 US

FEI Number: 98-0452205 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPENCER, THOMAS R 2 ALHAMBRA PLAZA, PENTHOUSE II-B CORAL GABLES, FL 33134 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:

Clastera is Circustrus of Devictors of August

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP ( ) Delete Title: CP (X) Change ( ) Addition

Name: CLAUDIO FRANCISCO AL, CAYAGA CORVALA N Name: CLAUDIO FRANCISCO AL, CAYAGA CORVALA N

Address: 1951 N.W. 68TH AVE., BLDG. #3-706, STE 237 Address: 1665 N. W. 79TH AVENUE City-St-Zip: MIAMI, FL 33122 City-St-Zip: MIAMI, FL 33126

Title: VCV (X) Delete Title: ( ) Change ( ) Addition Name: ARIEL SANTULLO ALTIE. RI Name:

 Address:
 1951 N.W. 68TH AVE., BLDG. #3-706, STE 237
 Address:

 City-St-Zip:
 MIAMI, FL 33122
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

Name: SPENCER, THOMAS R Name:

Address: 2 ALHAMBRA PLAZA, PENTHOUSE II-B Address:
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAUDIO ALCAYAGA PD 04/20/2006