
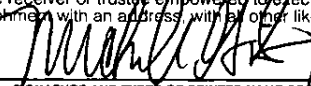


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90009 027 ***150.00

DOCUMENT # F05000007087 1. Entity Name AIR LOGISTICS AMERICA INC.					
Principal Place of Business 2261 NW 67TH AVENUE, BLDG 700 STE 215 MIAMI, FL 33122			Mailing Address 3340-C GREENS ROAD SUITE 50 HOUSTON, TX 77032		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 58-2629035	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MAYORGA, DIANA 2261 N.W. 67TH AVENUE BLVD. 700 STE 215 MIAMI, FL 33122			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
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			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEINER, HARRY 4721 NE 13TH AVENUE OAKLAND PARK, FL 33334	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / CEO (P) Pierre Brunet Zone de Fret 4 Roissytech, 3 rue du cerle Bat 3313 BP 13 526 France
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S METTERS, CHRIS 15 KEARSLEY DR. WORTHING WEST SUSSLX, UK BN 140,	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO (T) Christophe Viala Zone de Fret 4 Roissytech, 3 rue due cerole Bat 3313 BP 13 526 France
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CM MILLER, HENRY 10 SOUTH BRISTOL GATE PLACE THE WOODLANDS, TX 77380	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Director USA (M) Henry Miller 10 S. Bristol Gate Place The Woodlands, TX 77380
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 an other like empowered.					
SIGNATURE:  Financial Controller, USA					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date</small> 02-20-07	<small>Daytime Phone #</small> 281- 787-0002