2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007169

Entity Name: AVIATION CAPITAL ASSETS, CORP

FILED Feb 15, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

8320 NW 68ST 5600 NW 36ST SUITE 503

MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

8320 NW 68ST. 5600NW 36ST. SUITE503 MIAMI, FL 33166 MIAMI, FL 33166

FEI Number: 55-0898501 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:

 VALENTIN, HECTOR G
 VALENTIN, HECTOR G

 8320 NW 68ST
 5600 NW 36ST,

 MIAMI, FL 33166 US
 SUITE 503

 MIAMI, FL 33166 US
 MIAMI, FL 33166 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: HECTOR G. VALENTIN 02/15/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete

 Name:
 VALENTIN, HECTOR G

 Address:
 8130 NW 68ST

 City-St-Zip:
 MIAMI, FL 33166

 Title:
 S
 () Delete

 Name:
 VALENTIN, GABRIEL A

 Address:
 8320NW 68ST.

 City-St-Zip:
 MIAMI, FL 33166

Title: () Delete

Name: Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition Name: VALENTIN, HECTOR G Address: 5600 NW 36ST, SUITE 503

City-St-Zip: MIAMI, FL 33166

Title: S (X) Change () Addition

 Name:
 VALENTIN, GABRIEL A

 Address:
 5600NW 36ST, SUITE 503

 City-St-Zip:
 MIAMI, FL 33166

Title: V-P () Change (X) Addition

 Name:
 LAZAGA, JOSE I

 Address:
 5600NW 36ST. SUITE 503

 City-St-Zip:
 MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify 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: HECTOR G VALENTIN PRES 02/15/2008