

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F07000005565

**FILED**  
**Jul 19, 2011**  
**Secretary of State**

**Entity Name:** AEROLINEAS GALAPAGOS SOCIEDAD ANONIMA AEROGAL, INC.

**Current Principal Place of Business:**

AV. AMAZONAS 7797 Y JUAN  
HOLGUIN, QUITO, ECUADOR, EC 00000

**New Principal Place of Business:**

**Current Mailing Address:**

1435 NW 82 AV  
MIAMI, FL 33126 US

**New Mailing Address:**

8350 NW. 52ND STREET  
SUITE 100  
MIAMI, FL 33166 US

**FEI Number:** 98-0556741

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERO, MANUEL L  
1313 PONCE DE LEON BLVD  
SUITE 201  
CORAL GABLES, FL 33134 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: EXP  
Name: GAMERO, JULIO A  
Address: AV AMAZONAS 7797 Y JUAN HOLGUIN  
City-St-Zip: QUITO, ECUADOR, EC 00000

Title: DIR  
Name: CRUZ, JOSE M  
Address: AV AMAZONAS 7797 Y JUAN HOLGUIN  
City-St-Zip: QUITO, ECUADOR, EC 00000

Title: CEO  
Name: VILLEGAS, FABIO  
Address: AV AMAZONAS 7797 Y JUAN HOLGUIN  
City-St-Zip: QUITO, ECUADOR, EC 00000

Title: COO  
Name: ORTIZ, ESTUARDO  
Address: AV. AMAZONAS 7797 Y JUAN HOLGUIN  
City-St-Zip: QUITO, ECUADOR, EC 00000

Title: MM  
Name: MURGAS, ELISA  
Address: C  
City-St-Zip: QUITO, ECUADOR, EC 00000

Title: CFO  
Name: GRAJALES, GERARDO  
Address: AV. AMAZONAS 7797 Y JUAN HOLGUIN  
City-St-Zip: QUITO, ECUADOR, EC 00000

I hereby 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 all other like empowered.

SIGNATURE: JUAN CARLOS SARABIA

MGR

07/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date