

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2008 8:00 am
Secretary of State

08-04-2008 90034 011 ***150.00

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07102008 Chg-P CR2E034 (12/06)

DOCUMENT # F63835 1. Entity Name AEROSTRUCTURES, INC.					
Principal Place of Business 210 KINGS WAY, LEVEL 3 SOUTH MELBOURNE, VICTORIA AUSTRALIA 3205, XX			Mailing Address 210 KINGS WAY, LEVEL 3 SOUTH MELBOURNE, VICTORIA AUSTRALIA 3205, XX		
2. Principal Place of Business - No P.O. Box # 121 Downing ST.		3. Mailing Address same			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Panama City Beach		City & State same		4. FEI Number 59-2162623	
Zip FL		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32413		Country		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SHERWIN, JOAN 718 37TH AVE NE SAINT PETERSBURG, FL 33704			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTD LAMMON, ELMER B <input type="checkbox"/> Delete 121 DOWNING ST PANAMA CITY, FL 32413		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCTD <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LAMMON, BARBARA J <input type="checkbox"/> Delete 121 DOWNING CT PANAMA CITY, FL 32413		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOCKET, RODNEY D <input checked="" type="checkbox"/> Delete 35 WALLACE AVE TOORAK, VICTORIA AUSTRALIA,		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 all other like empowered.					
SIGNATURE: ELMER B LAMMON			Date 7-10-08 Daytime Phone # 850-235-1962		