

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90011 026 ***150.00

DOCUMENT # F94000003226

1. Entity Name
AEROMEXPRESS, S.A. DE C.V.



Principal Place of Business
**3663 NORTH SAM HOUSTON PKWY EAST
SUITE 510
HOUSTON, TX 77032 US**

Mailing Address
**3663 NORTH SAM HOUSTON PKWY EAST
SUITE 510
HOUSTON, TX 77032 US**

54063475



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07122004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
76-0341514

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARTINEZ, AMARILLIS
6105 NW 18TH STREET
BLDG 716C STE 403
MIAMI, FL 33126**

Name

Street Address (P.O. Box Number is Not Acceptable)

**2261 N.W. 67 Av.
BLDG 700, Suite 215**

City **Miami**

FL

Zip Code **33122**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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

TITLE **C** ☒ Delete
NAME **ALBREGHT, JAAN CAP**
STREET ADDRESS **AVE TEXCOCO S NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS-MEXIC, 15520**

TITLE **S** ☒ Delete
NAME **SORNHEIM, PEDRO**
STREET ADDRESS **AVE TEXCOCO S NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS-MEXIC, 15520**

TITLE **CFO** ☐ Delete
NAME **MAARTINEZ, MAURICIO NIETO**
STREET ADDRESS **AVE TEXCOCO S NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS-MEXIC, 15520**

TITLE **VP** ☐ Delete
NAME **STEVEN G CONNOLLY**
STREET ADDRESS **5795 W IMPERIAL HWY**
CITY-ST-ZIP **SANTA MONICA, CA 90405**

TITLE **C** ☒ Delete
NAME **WHITE, JAIME**
STREET ADDRESS **AVE TEXCOCO S NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS-MEXIC, PA 15520**

TITLE **S** ☐ Delete
NAME **ANAYA, JOSE**
STREET ADDRESS **AVE TEXCOCO S NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS-MEXIC, PA 15520**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **C** ☐ Change ☒ Addition
NAME **JUAN RODRIGUEZ CASTAÑEDA**
STREET ADDRESS **AVE TEXCOCO S, NO ESQ AVE TAHEL**
CITY-ST-ZIP **COL PENON DE LOS BANOS - MEXICO 15520**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **MARTINEZ, MAURICIO NIETO**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **LOS ANGELES CA 90405**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

[Signature]

MAURICIO NIETO MARTINEZ

July 14, 2004

281-227 9726

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #