2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 01, 2006 08:00 Al Secretary of State **DOCUMENT # P01000061384** 1. Entity Name ACERO SYSTEMS, INC. Mailing Address Principal Place of Business 6073 NW 167TH ST. #C4 6073 NW 167TH ST. #C4 MIAMI, FL 33015 US MIAMI, FL 33015 US CR2E034 (11/05) 04272006 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1113741 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CUENCA, CESAR DO NOT WRITE 1802 SW 84TH CT. MIAMI, FL 33155 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CUENCA, CESAR NAME STREET ADDRESS 1802 SW 84TH COURT CITY-ST-ZIP MIAMI, FL 33155 TITLE. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE

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 suppliermental report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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:

NAME STREET ADDRESS CITY-ST-7IP

AIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/2006 305.230-0911

Daytime Phone #

FILED