

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017405

Entity Name: ALTAIR TRADING CORP.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

11390 NW 87TH ST
HIALEAH, FL 330184514

New Principal Place of Business:

Current Mailing Address:

2850 WEST 80 ST., #105
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 02-0563249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, ARTURO R
2850 WEST 80 ST., #105
HIALEAH, FL 33018 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCIA, ARTURO R
Address: 2850 WEST 80 ST # 105
City-St-Zip: HIALEAH, FL 33018

Title: V () Delete
Name: GARCIA, MIUREL
Address: 11390 NW 87TH ST
City-St-Zip: HIALEAH, FL 330184514

Title: SD () Delete
Name: GARCIA, MARIANA
Address: 8353 SW 107 AVE #A
City-St-Zip: MIAMI, FL 33173

Title: TD () Delete
Name: RAMIREZ, FELIX
Address: 5217 W 26 AVENUE
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARTURO GARCIA

PD

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date