

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067090

FILED
Mar 03, 2008
Secretary of State

Entity Name: ALTAIR INTERNATIONAL, INC.

Current Principal Place of Business:

1850 SOUTH OCEAN DRIVE APT2910
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1850 SOUTH OCEAN DRIVE APT2910
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 54-2067835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOZA, VICTOR O
12405 NW 39TH AVE
GAINESVILLE, FL 32606 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: ESPINOZA, VICTOR OSCAR
Address: 12405 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: SD () Delete
Name: ESPINOZA, ALTAIR C
Address: 12405 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ESPINOZA, VICTOR O OWNER
Address: 12405 NW 39TH AVE
City-St-Zip: GAINESVILLE, FL 32606

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: VICTOR O. ESPINOZA

PD

03/03/2008

Electronic Signature of Signing Officer or Director

Date