2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070720

Entity Name: AEROLUX, CORP

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 816 W 16 AVE HIALEAH, FL 33012 Current Mailing Address: 818 W 16 AVE HIALEAH, FL 33012 Current Mailing Address: 818 W 16 AVE HIALEAH, FL 33012 FEI Number 27-0019123 FEI Number Applied For () FEI Number Not Applicable () FEI Nu	_	Mer ALICE	<i>5</i> 7, 0010 .				
HIALEAH, FL 33012 Current Mailing Address: New Mailing Address: San W 16 AVE HIALEAH, FL 33012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMPER, ODALYS 3816 W 16 AVE HIALEAH, FL 33012 US 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 Electronic Signature of Registered Agent Title: P () Delete Title: SAMPER, ODALYS Address: SAMPER, ODALYS Address: SAMPER, ODALYS Address: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: P (X) Change () Addition Name: SAMPER, ODALYS Address: Address: Address: Address: SAMPER, ODALYS Address: SAMPER, ODALYS Address: SAMPER, ODALYS Address: Address: SAMPER, ODALYS Address: S	Current Principal Place of Business:				New Principal Place of Business:		
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3816 W 16 AVE HIALEAH, FL 33012 FEI Number 27-0019123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMPER, ODALYS 3816 W 16 AVE HIALEAH, FL 33012 US 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 Electron Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: P () Delete Name: SAMPER, ODALYS Address: 3816 W 16 AVE Address: 3816 W 16 AVE City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012 Title: S (X) Delete Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Address: City-St-Zip: HIALEAH, FL 33012 Title: () Delete Name: SAMPER, ODALYS Address: AMPER, DORALYO Address: Address: Address: Address: Address: Address: AMPER, DORALYO Address: AMPER, DORALYO Address: Address	HIALEAH,	FL 33012			9 HIALEAH, I	FL 33012	
HIALEAH, FL 33012 FEI Number: 27-0019123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: SAMPER, ODALYS 3816 W 16 AVE HIALEAH, FL 33012 US 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 Electronic Sig	Current Mailing Address:				New Mailing Address:		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMPER, ODALYS 8500 W 4TH AV HIALEAH, FL 33012 US 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: 04/29/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: P () Delete Name: SAMPER, ODALYS Address: 3816 W 16 AVE Name: SAMPER, ODALYS Address: 4600 W 4TH AV S# 9 City-St-Zip: HIALEAH, FL 33012 Title: S (X) Delete Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Name: DANIELOVICH, MARIA S Address: 3816 W 16 AVE Name: SAMPER, LORENZO Address: G500 W 4TH AV S# 9 City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 3012					9		
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	Name: Address:	() Delete		Name: Address:	SAMPER, LO 6500 W 4TH	DRENZO I AV S# 9

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ODALYS SAMPER P 04/29/2005