2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# P03000007651

Entity Name: TRI-COUNTY AEROSPACE, INC.

Current Principal Place of Business:

1771-1773 NW 79TH AVE
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

1771-1773 NW 79TH AVE
MIAMI, FL 33126

New Mailing Address:

FEI Number: 42-1576511 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, EMILIO M
13614 N.W. 10TH STREET
MIAMI, FL 33182 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: BROWN, EMILIO M
Address: 13614 N.W. 10TH STREET
City-St-Zip: MIAMI, FL 33182

Title: SD ( ) Delete
Name: BROWN, ASTRID
Address: 13614 NW 10TH STREET
City-St-Zip: MIAMI, FL 33182

Title: VD ( ) Delete
Name: DIAZ, CARLOS
Address: 7850 NW 15TH CT
City-St-Zip: HOLLYWOOD, FL 33024

Title: D ( ) Delete
Name: LARA, JOSE
Address: 1210 NW 28TH STREET
City-St-Zip: N.M.B., FL 33162

Title: D ( ) Delete
Name: CONOLLY, LACEY
Address: 564 CLEAR CREEK DR
City-St-Zip: OSPREY, FL 34229

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:

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: ASTRID BROWN SD 03/27/2009

Electronic Signature of Signing Officer or Director Date