

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037860

Entity Name: AIRBORNE COMMUNICATION, INC.

FILED
Jun 02, 2008
Secretary of State

Current Principal Place of Business:

2103 CORAL WAY
SUITE 110
MIAMI, FL 33145

New Principal Place of Business:

14300 SW 129TH STREET #206
MIAMI, FL 33186

Current Mailing Address:

2103 CORAL WAY
SUITE 110
MIAMI, FL 33145

New Mailing Address:

14300 SW 129TH STREET #206
MIAMI, FL 33186

FEI Number: 27-0055915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMAS, LUIS A
2103 CORAL WAY
SUITE 110
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ARMAS, LUIS A
14300 SW 129TH STREET # 206
MIAMI, FL 33186 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: LUIS ALFREDO ARMAS

06/02/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARMAS, LUIS A
Address: 2103 CORAL WAY SUITE 110
City-St-Zip: MIAMI, FL 33145

Title: DIR (X) Delete
Name: YUNIS, ENRIQUE P
Address: 2339 CORAL WAY
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARMAS, LUIS A
Address: 14300 SW 129TH STREET # 206
City-St-Zip: MIAMI, FL 33186

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: LUIS ALFREDO ARMAS

PD

06/02/2008

Electronic Signature of Signing Officer or Director

Date