2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000113922

1. Entity Name
MONTERO AIR TECHNOLOGIES, INC.

FILED
Sep 12, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
1509 HOBBS STREET TAMPA, FL 33619	P.O. BOX 2952 RIVERVIEW, FL 33568

09022008   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
20-0797631		Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MONTERO, RAFAEL S
11203 SAINT ANDREWS COURT
RIVERVIEW, FL 33569

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

U00000959594
09/12/08--80003--005 158.75
DATE

FILE NOW!!! FEE IS $150.00 **Due by September 12, 2008**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	CEO
NAME	MONTERO, RAFAEL S
STREET ADDRESS	11203 SAINT ANDREWS COURT
CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Rafael S Montero_ Rafael S. Montero   9-5-08   813-684-3705

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #