## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000016710

Entity Name: AIRE INTERNATIONAL ENTERPRISES, INC.

FILED Sep 12, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

10306 PENNYTREE PLACE P.O. BOX 1987

TAMPA, FL 33624 LUTZ, FL 33548 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1987 P.O. BOX 1987 LUTZ, FL 33548 LUTZ, FL 33548

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, IRAN E ISABEL, ANCHUNDIA C 8006 N. HUBÉRT AVE. 19317 SANDY SPRINGS CIRCLE

TAMPA, FL 33614 LUTZ, FL 33558 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: ISABEL C. ANCHUNDIA 09/12/2005

> 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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: () Delete (X) Change ( ) Addition

RODRIGUEZ, IRAN E TRUJILLO, FAUSTO G Name: Name: 8006 N. HUBERT AVE. P.O. BOX 1987 Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: LUTZ, FL 33548 US

Title: Title: () Delete (X) Change ( ) Addition

Name: TRUJILLO, FAUSTO Name: ANCHUNDIA, ISABEL C

5525 LAKE LE CLARE ROAD 19317 SANDY SPRINGS CIRCLE Address: Address:

LUTZ, FL 33558 LUTZ, FL 33558 US City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change ( ) Addition NORMAN, LOUIS JR. ESTEVES, MIRALIS Name: Name:

13823 FLETCHERS MILL DRIVE P.O. BOX 1987 Address Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: LUTZ, FL 33548 US

Title: (X) Delete Title: () Change () Addition

RODRIGUEZ, GLADYS Name: Name: Address: 8006 N. HUBERT AVE. Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip:

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: ISABEL C. ANCHUNDIA 09/12/2005 ٧