

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140254

Entity Name: ISI AIRLINE ACADEMY, INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

1585 AVIATION CENTER PKWY
SUITE #602
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

1585 AVIATION CENTER PKWY
SUITE #602
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 20-4783298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VARGAS BAQUERO, LUIS MR.
1585 AVIATION CENTER PARKWAY
SUITE #602
DAYTONA BEACH, FL 32114 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: PR () Delete
Name: VARGAS BAQUERO, LUIS MR.
Address: 231 RIVERSIDE DRIVE, TOWER 1, UNIT 1209
City-St-Zip: HOLLY HILL, FL 32117 US

Title: VP () Delete
Name: VARGAS MARTINEZ, LUIS O MR.
Address: 231 RIVERSIDE DRIVE, TOWER 1, UNIT 1209
City-St-Zip: HOLLY HILL, FL 32117 US

Title: DIR () Delete
Name: BAQUERO MOLES, MARIA A MRS.
Address: 231 RIVERSIDE DRIVE, TOWER 1, UNIT 1209
City-St-Zip: HOLLY HILL, FL 32117 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: VARGAS BAQUERO, LUIS MR.
Address: 1585 AVIATION CENTER PKWY SUITE #602
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP (X) Change () Addition
Name: VARGAS MARTINEZ, LUIS O MR.
Address: 1585 AVIATION CENTER PKWY SUITE #602
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: DIR (X) Change () Addition
Name: BAQUERO MOLES, MARIA A MRS.
Address: 1585 AVIATION CENTER PKWY SUITE #602
City-St-Zip: DAYTONA BEACH, FL 32114 US

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 VARGAS BAQUERO

VP

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date