2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000155243

1. Entity Name
AEROCONDOR TRAVEL INC.

Principal Place of Business	Mailing Address
406 16TH ST MIAMI BCH, FL 33139	406 16TH ST MIAMI BCH, FL 33139

DO NOT WRITE IN THIS SPACE

03142008 No Chg P CR2E031 (11/05)

4. FEI Number
03-0574879

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

REVOREDO, OSCAR
406 16TH ST
MIAMI BCH, FL 33139

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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) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000871396
04/09/08-80127-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	REVOREDO, OSCAR
STREET ADDRESS	187 LAKEVIEW DR APT #101
CITY-ST-ZIP	WESTON, FL 33326
TITLE	VD
NAME	MORENO, LILLA
STREET ADDRESS	406 16TH ST
CITY-ST-ZIP	MIAMI BCH, FL 33139
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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: OSCAR REVOREDO 3/24/08 954-389-8521
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #