2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028601

Entity Name: AEROSPACE MARKETING INCORPORATED

FILED Feb 06, 2007 Secretary of State

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

138 PALM COAST PKWY - # 266 138 PALM COAST PKWY NE 266

PALM COAST, FL 32137

PALM COAST, FL 32137

Current Mailing Address: New Mailing Address:

138 PALM COAST PKWY - # 266 138 PALM COAST PKWY NE 266

PALM COAST, FL 32137

PALM COAST, FL 32137

FEI Number: 20-4701658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOOD, VICTOR GOOD, VICTOR

138 PALM COAST PKWY - # 266 138 PALM COAST PKWY NE

PALM COAST, FL 32137 US 266 PALM COAST, FL 32137 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: VICTOR GOOD 02/06/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete

GOOD, JULIE Name: 138 PALM COAST PKWY - # 266 Address:

City-St-Zip: PALM COAST, FL 32137

Title: () Delete

Name: GOOD, VICTOR

138 PALM COAST PKWY - # 266 Address:

PALM COAST, FL 32137 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

GOOD, JULIE Name:

138 PALM COAST PKWY NE- # 266 Address:

City-St-Zip: PALM COAST, FL 32137

Title: (X) Change () Addition

Name: GOOD, VICTOR

Address: 138 PALM COAST PKWY NE- # 266

PALM COAST, FL 32137 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VICTOR GOOD 02/06/2007 S