2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000146293

Entity Name: AIRZONE USA CORPORATION

FILED Apr 07, 2008 Secretary of State

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

2023 NW 84 AVENUE 1930 NE 147TH TERRACE MIAMI, FL 33122 US NORTH MIAMI, FL 33181 US

Current Mailing Address: New Mailing Address:

2023 NW 84 AVENUE 1930 NE 147TH TERRACE MIAMI, FL 33122 US NORTH MIAMI, FL 33181 US

FEI Number: 20-8339674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ARIAS, XAVIER

2023 NW 84 AVENUE

MIAMI, FL 33122 US

ARIAS, XAVIER

1930 NE 147TH TERRACE

NORTH MIAMI, FL 33181 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: XAVIER ARIAS 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MEDIATO, ANTONIO
 Name:
 MEDIATO, ANTONIO

 Address:
 2023 NW 84 AVENUE
 Address:
 1930 NE 147TH TERRACE

MIAMI, FL 33122 US

Address: 1930 NE 1471H TERRACE

City-St-Zip: NORTH MIAMI, FL 33181 US

Title: VP () Delete Title: VP (X) Change () Addition Name: MORAL, JULIO Name: MORAL, JULIO

Name: MORAL, JULIO Name: MORAL, JULIO
Address: 2023 NW AVENUE Address: 1930 NE 147TH TERRACE

City-St-Zip: MIAMI, FL 33122 US City-St-Zip: NORTH MIAMI, FL 33181 US

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

 Name:
 ARIAS, XAVIER
 Name:
 ARIAS, XAVIER

 Address:
 2023 NW 84 AVENUE
 Address:
 1930 NE 147TH TERRACE

 Address:
 2023 NW 84 AVENUE
 Address:
 1930 NE 147TH TERRACE

 City-St-Zip:
 MIAMI, FL 33122 US
 City-St-Zip:
 NORTH MIAMI, FL 33181 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: XAVIER ARIAS D,S 04/07/2008