

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000026223

FILED
Apr 29, 2008
Secretary of State

Entity Name: AEROMARINE WEST INDIES AIRWAYS CORP.

Current Principal Place of Business:

10460 TURPIN AVE.
HASTINGS, FL 32145

New Principal Place of Business:

KATHRINSTADT AIRPORT. 10460 TURPIN AVE.
HASTINGS, FL 32145

Current Mailing Address:

10460 TURPIN AVE.
HASTINGS, FL 32145

New Mailing Address:

KATHRINSTADT AIRPORT. 10460 TURPIN AVE.
HASTINGS, FL 32145

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

Name and Address of Current Registered Agent:

RUSSELL, JOHN H
10460 TURPIN AVE.
HASTINGS, FL 32145 US

Name and Address of New Registered Agent:

RUSSELL, JOHN H
KATHRINSTADT AIRPORT. 10460 TURPIN AVE.
HASTINGS, FL 32145 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: _____

Electronic Signature of Registered Agent

04/29/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: FORQUER, KATHERINE K
Address: 10460 TURPIN AVE.
City-St-Zip: HASTINGS, FL 32145

Title: COO () Delete
Name: RUSSELL, JOHN H
Address: 10460 TURPIN AVE.
City-St-Zip: HASTINGS, FL 32145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: FORQUER, KATHERINE K
Address: KATHRINSTADT AIRPORT. 10460 TURPIN AVE.
City-St-Zip: HASTINGS, FL 32145

Title: COO (X) Change () Addition
Name: RUSSELL, JOHN H
Address: KATHRINSTADT AIRPORT. 10460 TURPIN AVE.
City-St-Zip: HASTINGS, FL 32145

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: JOHN H. RUSSELL

Electronic Signature of Signing Officer or Director

COO

04/29/2008

Date