2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000073723

Entity Name: KANSAS AEROSPACE, INC

FILED Sep 02, 2009 Secretary of State

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

4115 NW 132 ST 4115 NORHTWEST 132ND STREET

UNIT O UNIT O

OPA LOCKA, FL 33054 OPA-LOCKA, FL 33054

Current Mailing Address: New Mailing Address:

4115 NW 132 ST 4115 NORHTWEST 132ND STREET

UNIT O UNIT O

OPA LOCKA, FL 33054 OPA-LOCKA, FL 33054

FEI Number: 26-1285620 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:

CAMACHO, SANDRA
4115 NW 132 ST
4115 NORTHWEST 132ND STREET
UNIT O
4117 UNIT O

OPA LOCKA, FL 33054 US OPA-LOCKA, FL 33054 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: SANDRA LOPEZ 09/02/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 CAMACHO, SANDRA
 Name:
 LOPEZ, SANDRA

 Address:
 4115 NW 132 ST, UNIT O
 Address:
 4115 NORHTWETS 132ND STREET, UNIT O

City-St-Zip: OPA LOCKA, FL 33054 City-St-Zip: OPA-LOCKA, FL 33054

ora-2001a, 12 33034 Otty-322p. Ora-2001a, 12 33034

Title: VPD () Delete Title: VP (X) Change () Addition

Name: RODRIGUEZ, FRANCISCO D Name: MARTINEZ, ANGEL

 Address:
 4115 NW 132 ST, UNIT O
 Address:
 4115 NORHTWETS 132ND STREET, UNIT O

 City-St-Zip:
 OPA LOCKA, FL 33054
 City-St-Zip:
 OPA-LOCKA, FL 33054

oky 6(2)p. 6(7) 266(6), 12 33334

 Name:
 CAMACHO, ANGEL
 Name:

 Address:
 4115 NW 132 ST, UNIT O
 Address:

 City-St-Zip:
 OPA LOCKA, FL 33054
 City-St-Zip:

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: SANDRA LOPEZ P 09/02/2009