2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000003756

Entity Name: A.E.L.S., INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1909 TYLE SUITE #60: HOLLYWO		20			
Current Ma	ailing Addre	ess:	New Mailing Addre	New Mailing Address:	
1909 TYLE SUITE #60: HOLLYWO		20			
FEI Number:	65-0385864	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:					
	NORMAN R STREET, 3 OOD, FL 330				
The above in the State		submits this statement for the purp	pose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent				Date	
Election Can	npaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ANGELOTTI,	STREET, SUITE 603	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STEPHEN GO	STREET, SUITE 603	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GORDICH, LA	STREET, SUITE 603	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NORMAN BECKER RA 02/17/2009