

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000075953

Entity Name: AEROCARGAS ARGENTINAS, INC.

FILED  
Feb 11, 2009  
Secretary of State

## Current Principal Place of Business:

8097 NW 67 ST  
MIAMI, FL 33166

## New Principal Place of Business:

8229 NW 66 ST  
MIAMI, FL 33166

## Current Mailing Address:

8097 NW 67 ST  
MIAMI, FL 33166

## New Mailing Address:

8229 NW 66 ST  
MIAMI, FL 33166

FEI Number: 65-0536915

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CASTILLO, JOSE L  
8097 NW 67 ST  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

VEGA, JOSE L  
25 SE 2 AVE  
410  
MIAMI, FL 33131 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: JOSE M VEGA

02/11/2009

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:

Title: PSD ( ) Delete  
Name: CASTILLO, JOSE L  
Address: 8097 NW 67 ST  
City-St-Zip: MIAMI, FL 33166 US

Title: V ( ) Delete  
Name: SAMBRA, MARCOS M  
Address: 8097 NW 67 ST  
City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CASTILLO, JOSE L  
Address: 8229 NW 66 ST  
City-St-Zip: MIAMI, FL 33166 US

Title: V (X) Change ( ) Addition  
Name: SAMBRA, MARCOS M  
Address: 8229 NW 66 ST  
City-St-Zip: MIAMI, FL 33166

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: JOSE L CASTILLO

P

02/11/2009

Electronic Signature of Signing Officer or Director

Date