

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000026330

Entity Name: AIR-VAL AMERICA, INC.

FILED  
Mar 29, 2010  
Secretary of State

## Current Principal Place of Business:

1840 NW 95TH AVE  
DORAL, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

1840 NW 95TH AVE  
DORAL, FL 33172

## New Mailing Address:

FEI Number: 65-0670038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPWIZ REGISTERED AGENTS, INC.  
8750 NW 36 STREET  
SUITE 220  
MIAMI, FL 33178 US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: GARCIA, FRANCISCO  
Address: 2335 NW 107 AVENUE, BLG. #2, SUITE 6  
City-St-Zip: DORAL, FL 33172

Title: VP  
Name: GARCIA, DAVID  
Address: 2335 NW 107 AVENUE, BLG. #2, SUITE 6  
City-St-Zip: DORAL, FL 33172

Title: S  
Name: GARCIA, EVA  
Address: 2335 NW 107 AVENUE, BLG. #2, SUITE 6  
City-St-Zip: DORAL, FL 33172

Title: T  
Name: GARCIA, NURIA  
Address: 2335 NW 107 AVENUE, BLG. #2, SUITE 6  
City-St-Zip: DORAL, FL 33172

Title: M  
Name: FERRARI, JORGE  
Address: 2335 NW 107 AVENUE, BLG. #2, SUITE 6  
City-St-Zip: DORAL, FL 33172

I hereby 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 all other like empowered.

SIGNATURE: JORGE FERRARI

M

03/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date