2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 8:00 am Secretary of State 04-30-2007 90464 038 ***158.75

DOCUI 1. Entity Name AEROPIA		0008147	1	ı								
Principal Place of Business 8586 NW 72ND STREET MIAMI, FL 33166 US			Mailing Address 8586 NW 72ND STREET MIAMI, FL 33166 US				40091837					
8940	ace of Business - No P.O.	erace E	3. Mailing Address 8940 NW 24th TERRACE			₫						
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				04262007	Chg-P	CR2E0	34 (12/06)		
City & State . MIAMI FLORIDA			City & State MIAMI FLORIA			,	4. FEI Numb 65-078	<u> </u>	plied For t Applicable			
Zip 33/7		<u> </u>	Zip Country 33172 (/3				Certificate of Status Desired					
	6. Name and Address	of Current Regis	tered Agent		Name		7. Name and	Address of New F	Registered A	\gent		
3700 NOR	ROBERT \$ TH 29TH AVENUE				Street Ad	ddress (I	P.O. Box Numb	er is Not Acceptable	e)			
UNIT 101 HOLLYWO	OD, FL 33020-1006											
	4. 4.				City				FL	Zip Code	,	
	named entity submits this sons of registered agent.	statement for the p	ourpose of changing its	register	ed office or	register	ed agent, or bo	th, in the State of FI	orida. I am f	familiar with,	and accept	
SIGNATURE_	Signature, typed or printed name of r	egistered agent and tide	if applicable. (NO	E: Plagistera	d Agent signatu	Deviuper ex	when reinstating)		DATE	·		
FILI After Ma	E NOW!!! FEE IS \$1 ay 1, 2007 Fee will I	50.00 be \$550.00	9. Election Camps Trust Fund Con			\$5. Add	00 May Be ed to Fees					
10.		CERS AND DIREC	CTORS	11.			ADDITIONS	/CHANGES TO OF	FICERS AND		IN 11	
title Name	D RICE, STEPHEN J		☐ Delete	TITU NAM	1	PZ	CE S	TEVE		Change	☐ Addition	
STREET ADDRESS	8586 NW 72 STREET				ET ADDRESS			ZA TER		7		
CITY-ST-ZIP	MIAMI, FL 33166			-1	-ST-ZIP		IAMI	FL 331	72_			
title Name			L Delete	TITL:	-	V. KE	PIING	, JOHN		☐ Change ☑	▼ Addition	
STREET ADDRESS CITY+ST-ZIP					EET ADDRESS	894	VO NON	247 TE	/77	-		
TITLE			☐ Delete	TITL	-ST-ZIP	VI	19 mz	FL 33	1/2	☐ Change	Addition	
NAME				NAM	- 1	1/2	ECCHI	PETER	2	_ •	C ADDIGOT	
STREET ADORESS City-St-Zip	1				EET ADDRESS '- St-Zip	894	40 NX	247 72	ミスペスム ノフフ	E		
TITLE			☐ Delete	TITL		M.	147112	FL 33. TOHN 124% FE FL 3317		☐ Change	Addition	
NAME				NAM		KR	USE, S	TOHN				
STREET ADDRESS CITY+ST-ZIP					eet address '-st-zip	89	40 NW	1 243 TE EL 9917	KRACE 2.			
TITLE			☐ Delete	TITL	E ·	· •.				☐ Change	Addition	
NAME STREET ADDRESS				NAM CTD	_	5,	10010	ON, CLZ	YE	_		
CITY-ST-ZIP					eet address (-st-zip	189	YO NW TAMI	24th TRA FL 331	72			
TITLE			☐ Delete	IIΤ	E	V.				☐ Change	Addition	
NAME STREET ADDRESS				NAM STRI	re Eet adoress	1	055,	ベルカミモン	w Zann	~~~		
CITY-ST-ZIP					-ST-ZIP	100	140 NV IAMI,	ANDRE 1 N 24 th 1 FL 331	 72			
12. I hereby of indicated of the cor	certify that the information s on this report or suppleme poration or the receiver of	supplied with this f mayreport is true a triggee empowere	iling does not qualify tand accurate and that do execute this report	or the ex my signa t as requ	emptions c ture shall h ired by Cha	ontained	1 in Chapter 11	9 Florida Statutes	I further cen	tify that the in	iformation or director Block 11 if	

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000081471 1. Entity Name AEROPIA, INC.							ATTACHMENT					
Principal Place o 8586 NW 72ND MIAMI, FL 331		B586 NW 72ND STREET			4009 1837							
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 8940 NW 24 TERRACE 8940 NW A					TERR	ACO						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			04262007	Chg-P	CR2E034 (12/06)			
City & State MIAMI FLORIDA			City & State MIAMI	City & State MIANT FLOR			4. FEI Numb 65-078		· · · · · · · · · · · · · · · · · · ·		plied For t Applicable	
Zip 3317		untry	Zip 33172	Coun			5. Certificate	of Status Desired		8.75 Add ee Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
FORMAN, ROBERT S 3700 NORTH 29TH AVENUE					Street Address (P.O. Box Number is Not Acceptable)							
1 '	UNIT 101 HOLLYWOOD, FL 33020-1006											
			nt for the purpose of changing it		City		FL Zip Code					
FILE	NOW!!! FEI	E IS \$150.00 e Will be \$5	9. Election Camp	aign Fina	ncing _	\$5.	.00 May Be ed to Fees		DATE			
10.		OFFICERS /	AND DIRECTORS	11.				CHANGES TO OF		DIRECTORS Change	S IN 11	
NAME F STREET ADDRESS 8	RICE, STEPHEN J 8 8586 NW 72 STREET ST					BEAUMONT JOHN THOOPESS 8940 NW 248 TERRACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	1					<u>.</u>	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	CIT	ME IEET ADDRESS Y-ST-ZIP					☐ Change	Addition	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental eport is true and accurate and that my 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 tlustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment within a patterss, with all other like empowered.												
SIGNATURE: JOHN KRUSE 4/27/07 305-717-6577 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DaySing Priorie #												