2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000087348

City-St-Zip:

DORAL, FL 33178

FILED Oct 12, 2009 Secretary of State

Entity Nar	ne: AERO DOC	C, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1790 N.W. 72ND AVE. MIAMI, FL 33126			1790 N.W. 82ND AVE MIAMI, FL 33126	1790 N.W. 82ND AVE. MIAMI, FL 33126	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1790 N.W. 72ND AVE. MIAMI, FL 33126			1790 N.W. 82ND AVE MIAMI, FL 33126	1790 N.W. 82ND AVE. MIAMI, FL 33126	
FEI Number:	65-0789782	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MULLER, GERMAN W 1790 NW 82 ND AVENUE MIAMI, FL 33126 US				1790 NW 82 ND AVENUE	
The above in the State	named entity su of Florida.	bmits this statement for the pu	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: JULIEN HARDY				10/12/2009	
	Electronic	Signature of Registered Ager	nt	Date	
		2)(b), F.S., the corporation did not rust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D MULLER, GERMA 101 CRANDON BI KEY BISCAYNE,	.N W _VD., #469	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTD () D VITALE, MARIA S 101 CRANDON B KEY BISCAYNE, I	_VD., #469	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SD () D ARAOZ, RODRIG 3749 ALCANTARA	0	Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: GERMAN MULLER GM 10/12/2009