2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000096099

Title:

Name:

Address:

City-St-Zip:

DAS

() Delete

FERRARESI, DANIEL J

111 NE 1ST STREET

MIAMI, FL 33132

FILED Apr 27, 2005 Secretary of State

Entity Nam	1e: AEROSF	ACE FINANCE CORP.			
Current Pr	incipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
111 NE 1ST 8TH FLOOI MIAMI, FL	R				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
111 NE 1ST 8TH FLOOI MIAMI, FL	R				
FEI Number:	65-0809777	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
ROBJOHNS BATCHELOD, ANNE 111 NE 1ST STREET 8TH FLOOR MIAMI, FL 33132 US			111 NE 1ST STREET	ROBJOHNS BATCHELOR, ANNE 111 NE 1ST STREET 8TH FLOOR MIAMI, FL 33132 US	
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E: ANNE BA	ATCHELOR-ROBJOHNS		04/27/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Cam	paign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VT (ANSLEY, NANO 111 NE 1ST ST MIAMI, FL 331	reet	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (BATCHELOR, 111 NE 1ST ST MIAMI, FL 331	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	me: VELASCO, CARIDAD dress: 111 NE 1ST STREET		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	,) Delete ROBJOHNS, ANNE	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CARIDAD VELASCO VΡ 04/27/2005

() Change () Addition