

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000096099

FILED
Mar 30, 2009
Secretary of State

Entity Name: AEROSPACE FINANCE CORP.

Current Principal Place of Business:

1680 MICHIGAN AVE PH 1
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

1680 MICHIGAN AVE
PH 1
MIAMI BEACH, FL 33139 US

Current Mailing Address:

1680 MICHIGAN AVE PH 1
MIAMI BEACH, FL 33139 US

New Mailing Address:

1680 MICHIGAN AVE
PH 1
MIAMI BEACH, FL 33139 US

FEI Number: 65-0809777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBJOHNS BATCHELOR, ANNE
1680 MICHIGAN AVE., PH 1
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

ROBJOHNS BATCHELOR, ANNE
1680 MICHIGAN AVE
PH 1
MIAMI BEACH, FL 33139 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: ANNE BATCHELOR-ROBJOHNS

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: ANSLEY, NANCY J
Address: 1680 MICHIGAN AVE., PH 1
City-St-Zip: MIAMI BEACH, FL 33139

Title: P () Delete
Name: BATCHELOR, JONATHAN
Address: 1680 MICHIGAN AVE., PH 1
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: VELASCO, CARIDAD
Address: 1680 MICHIGAN AVE., PH 1
City-St-Zip: MIAMI BEACH, FL 33139

Title: DVS () Delete
Name: BATCHELOR-ROBJOHNS, ANNE
Address: 1680 MICHIGAN AVE., PH 1
City-St-Zip: MIAMI BEACH, FL 33139

Title: DAS () Delete
Name: FERRARESI, DANIEL J
Address: 1680 MICHIGAN AVE., PH 1
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARIDAD VELASCO

VP

03/30/2009

Electronic Signature of Signing Officer or Director

Date