



UNITED STATES-MEXICO CHAMBER OF  
COMMERCE CALIFORNIA REGIONAL CHAPTER

May 21, 2009 - 6:00 pm - 9:00 pm

## Flight Path Learning Center and Museum

6661 West Imperial Hwy  
Los Angeles, CA 90045



The United States Mexico Chamber of Commerce  
California Regional Chapter cordially welcomes  
The United States-Mexico Chamber of Commerce Professional Network

This project attempts to unify Mexican Professionals living in Los Angeles area  
in order to contribute to their personal and professional development.

Join us every third Thursday of the month in a casual cocktail meeting to get  
to know us and understand in deep our social and cultural initiatives,  
professional goals and future projects.

## HISTORY OF FLIGHT PATH

In November 2002 the Los Angeles Board of Airport Commissioners officially  
authorized Flight Path to operate an educational facility and museum in the  
LAX Imperial Terminal. During the next year, Flight Path refurbished the  
terminal with major support from Los Angeles World Airports, the City agency  
which operates LAX. The initial focus of the facility is to celebrate the 75th  
anniversary of LAX and the 100th anniversary of the first powered flight by  
the Wright Brothers.

Flight Path was founded in 1995 as a nonprofit, community-based organiza-  
tion to honor aviation pioneers, recognize the economic importance of  
aviation and aerospace to Southern California, and encourage youth to  
pursue education and careers in aviation-related fields. The kickoff project  
was a series of sidewalk plaques in the LAX business district saluting aviation  
pioneers, organizations and locations. This "Flight Path" is the aviation  
equivalent of the famed Hollywood Walk of Fame.



**MEXICANA**

**México**  
Tourism Board

## *Registration Form:*

For reservations please call the USMCOC at (310) 586-7901 or send us an e-mail at [marlen@usmcocca.org](mailto:marlen@usmcocca.org)

**Yes, register me (us) for the** Mexican Professionals Network

**Members \$ 20 Non-Members \$ 20**

Names (s) \_\_\_\_\_

Company name \_\_\_\_\_

Contact name and title \_\_\_\_\_

Cooperating Organization (if any) \_\_\_\_\_

College or University (if full-time student) \_\_\_\_\_

Business address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Method of payment: \_\_\_\_\_ Visa/Master Card/American Express \_\_\_\_\_ Check Amount: \_\_\_\_\_

Credit card number \_\_\_\_\_ Expiration \_\_\_\_\_

Authorizing signature \_\_\_\_\_

\_\_\_\_ Student(s) College or university: \_\_\_\_\_