


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P0000092394 1. Entity Name AIR I AM, INC.	
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Principal Place of Business 9770 LAGO DRIVE BOYNTON BEACH, FL 33437	Mailing Address 9770 LAGO DRIVE BOYNTON BEACH, FL 33437
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04032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1049736	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDSTEIN, MICHAEL
9770 LAGO DRIVE
BOYNTON BEACH, FL 33437

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Michael Goldstein* DATE: 4/3/04

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

1100000105858
04/07/04 80042-007 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOLDSTEIN, MICHAEL 9770 LAGO DRIVE BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GOLDSTEIN, LESLIE 97750 BOCA GARDENS CIRCLE NORTH BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael Goldstein* DATE: 4/3/04 DAYTIME PHONE #: 561 424 0673

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #