2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729804

Entity Name: SANSEAIR, INC.

FILED Jan 14, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
% P.B.M. 5901 SUN I ST. PETER	BLVD #203 ISBURG, FL 33715	US			
Current Mailing Address:			New Mailing Address:		
% P.B.M. 5901 SUN BLVD #203 ST. PETERSBURG, FL 33715 US					
FEI Number:	59-1869349 FEI Nu	ımber Applied For() FEI Nu	mber Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NEWTON, WILLIAM C 5901 SUN BLVD. STE 203 ST. PETERSBURG, FL 33715 US		PBM 5901 SUN BLVD. STE 203 ST. PETERSBURG, FL 33715 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: WCN			01/14/2008		
	Electronic Signa	ature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPD () Delete JOHN MITCHELL, 5901 SUN BLVD #203 ST PETERSBURG, FL 3	3617	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP () Delete DUDASH, STEVE 5901 SUN BLVD #203 SAINT PETERSBURG, F	L 33715	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	TD () Delete MONAHAN, JACK 5901 SUN BLVD #203 SAINT PETERSBURG, F	L 33715	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete LAL GAURI, 5901 SUN BLVD #203 ST PETERSBURG, FL 3	3706	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WINIEKI, KAREN 5901 SUN BLVD #203 ST. PETERSBURG, FL 3	33706	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LUNA, RALPH 5901 SUN BLVD #203 ST. PETERSBURG, FL 33706	
Title: Name: Address: City-St-Zip:	D () Delete LALAMA, DANNY 5901 SUN BLVD #203 ST. PETERSBURG, FL 3	33706	Title: Name: Address: City-St-Zip:	() 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WCN RA 01/14/2008