


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90012 042 ***150.00

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| DOCUMENT # F01000005133 |  |
| 1. Entity Name INLAND AIR SYSTEMS INC. | |

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| Principal Place of Business 801 COMMERCE DRIVE GULF SHORES, AL 36542 | Mailing Address 801 COMMERCE DRIVE GULF SHORES, AL 36542 |
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| 2. Principal Place of Business - No P.O. Box # 8270 Spanish Fort Bl | 3. Mailing Address PO Box 1329 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

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|--|------------------------------------|
| City & State Spanish Fort AL | City & State Fairhope AL |
| Zip 36527 | Zip 36533 |
| Country Baldwin | Country Baldwin |

40048483



03112008 Chg-P CR2E034 (12/06)

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|---|--|
| 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR., STE. 4 WESTON, FL 33331 | |
| 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |

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|------------------------------------|--|
| 4. FEI Number 63-0804661 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PT GORAM, MICHAEL S 11439 COUNTY ROAD 1 FAIRHOPE, AL 36532 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VS GORAM, FREDA R 11439 COUNTY ROAD 1 FAIRHOPE, AL 36532 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Bryce Gorum* **3/12/08 251-626-7022**

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