

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F86442

FILED  
Apr 17, 2004  
Secretary of State

Entity Name: AIR SUNSHINE INC.

**Current Principal Place of Business:**

17400 S.W. 48 STREET  
FORT LAUDERDALE, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

17400 S.W. 48 STREET  
FORT LAUDERDALE, FL 33331

**New Mailing Address:**

FEI Number: 59-2219808

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ADILI, RONNIE ESQ  
8801 PARADISE DRIVE  
TAMARAC, FL 33321 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: STD ( ) Delete  
Name: ADILI, MIRMOHAMMAD,  
Address: 17400 S.W. 48 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: VPD ( ) Delete  
Name: ADILI, MIRYAHYA  
Address: 17400 S W 48TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33331

Title: PD ( ) Delete  
Name: ADILI, ALLEN,  
Address: 8801 N.W. 61ST ST.  
City-St-Zip: TAMARAC, FL 33321

Title: VP ( ) Delete  
Name: ADILI, MARMASOOD  
Address: 17400 SW 48TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33331

**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: VP (X) Change ( ) Addition  
Name: ADILI, MIRMASOOD  
Address: 17400 SW 48TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MIRMOHAMMAD ADILI

STD

04/17/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date