2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F87551

Entity Name
 GOING AIRE, INC.



FILED Feb 09, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

5 BARRACUDA LANE

OCEAN REEF CLUB NORTH KEY LARGO, FL 33037 0

DO NOT WRITE IN THIS SPACE

6 BARRACUDA LANE OCEAN REEF CLUB

NORTH KEY LARGO, FL 33037

j 11

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2199233

01192006

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional

6. Name and Address of Current Registered Agent

| GOING, WILLIAM 29430 S.W. 182 AVENUE HOMESTEAD, FL 33030 | | | 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 Signature, typed or printed name of registered agent and title Applicable. (NOTE, Registered Agent signature required when Telinstating) DATE | | | | | |
| FiL After Ma | E NOW!!! FEE IS \$150.00 ny 1, 2006 Fee will be \$550.00 9. Election Campaign Trust Fund Contrib | | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIRECTORS | '- | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | GOING, WILLIAM 29430 SW 182 AVE HOMESTEAD, FL | | | U000008425548 | |
| TITLE | STD | | = - | 02/20/06-80005-009 150.00 | |
| NAME STREET ADDRESS CITY-ST-ZIP | GOING, RITA 29430 SW 182 AVE HOMESTEAD, FL | | | U00000425540 02/20/06-80005-010 8.75 | |
| TITLE | PD COINC PLIANT | | . | nti th op.onnna nin of ta | |
| NAME STREET ADDRESS CITY-ST-ZIP | GOING, DUANE 29430 SW 182 AVE HOMESTEAD, FL | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | | | IN ' | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ,- | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information in the control of the contro | | | | | |

12. I hereby centify 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 eath; 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!

INATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

Sec Proas

1/27/06 30536729.