2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000002731

1. Entity Name AIR NOW, INC.

Principal Place of Business

Mailing Address

2331 WHITFIELD INDUSTRIAL WAY SARASOTA, FL 34243

2331 WHITFIELD INDUSTRIAL WAY SARASOTA, FL 34243

FILED Mar 19, 2007 08:00 AM Secretary of State

Not Applicable



DO NOT WRITE IN THIS SPACE

03122007	No Chg-P	CR2E034 (1	1/0	(5)
I. FEI Number				Applied For

5. Certificate of Status Desired See Required \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EMRICK, JOHN M 2331 WHITFIELD INDUSTRIAL WAY SARASOTA, FL 34243

DO NOT WRITE IN THIS SPACE

65-0921718

8. The above the obligat	named entity submits this statement for the putions of registered agent.	urpose of changing its re	gistered office of	or registered agent	, or both, in the St	tate of Florida. I am familiar with,	and accept
SIGNATURE.	Signature, typed or printed name of registered agent and bile if	applicable. (NOTE: F	Registered Agent signs	ture required when reinsta	ating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00				\$5.00 May Added to Fee			
10.	OFFICERS AND DIREC	TORS		*	 	,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD EMRICK, JOHN M 2331 WHITFIELD INDUSTRIAL WAY SARASOTA, FL 34243				, ,		;
TITLE NAME STREET ADDRESS CITY-S1-ZIP	VP SALCICCIA, PAUL A 2331 WHITFIELD INDUSTRIAL WAY SARASOTA, FL 34243			e de la companya de l	· .		150 iii
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Ę	D	DO NOT WRITE		
TITLE NAME STREET ADDRESS				. • 11	N THIS	SPACE	

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 a report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY: ST: ZIP TITLE NAME STREET ADDRESS CITY: ST: ZIP

SHATURE AND TYPED OR PRINGED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-03

941-739-1511