

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J87182

Entity Name: DELTA AIRE INC.

FILED  
Apr 18, 2008  
Secretary of State

**Current Principal Place of Business:**

% MICHAEL RAYMOND MICHAUD  
1211 JULY CIRCLE  
DELTONA, FL 32738

**New Principal Place of Business:**

DELTA AIRE INC.  
1211 JULY CIRCLE  
DELTONA, FL 32738

**Current Mailing Address:**

% MICHAEL RAYMOND MICHAUD  
1211 JULY CIRCLE  
DELTONA, FL 32738

**New Mailing Address:**

FEI Number: 59-2839089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MICHAUD, MICHAEL RAYMOND  
1211 JULY CIRCLE  
DELTONA, FL 32738 US

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

MICHAUD, MICHAEL R OWNER  
1211 JULY CIRCLE  
DELTONA, FL 32738 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: MICHAEL R. MICHAUD

04/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVD ( ) Delete  
Name: MICHAUD, MICHAEL R  
Address: 1211 JULY CIR  
City-St-Zip: DELTONA, FL 32738 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL R. MICHAUD

PVD

04/18/2008

Electronic Signature of Signing Officer or Director

Date