2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L13835

FILED Apr 20, 2009 Secretary of State

Entity Name: ADVANCED AIR INTERNATIONAL, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
6461 GARI STE 102 RIVIERA B	DEN RD CH, FL 33404	US		
Current M	ailing Address	s:	New Mailing Addres	s:
6461 GARI STE 102 RIVIERA B	DEN RD CH, FL 33404	US		
	65-0139736	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Cu	urrent Registered Agent:	Name and Address o	of New Registered Agent:
	ER, JOHN C., E HBRIDGE PAV			
The above	CH, FL 33401		ourpose of changing its registere	ed office or registered agent, or both,
The above	CH, FL 33401 named entity so of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
The above in the State	CH, FL 33401 named entity su of Florida. RE:			ed office or registered agent, or both, Date
The above in the State SIGNATUF	named entity stee of Florida. RE: Electronic	ubmits this statement for the p		
The above in the State SIGNATUF Election Can	named entity stee of Florida. RE: Electronic	ubmits this statement for the posterior of Registered Age Trust Fund Contribution ().	ent	
The above in the State SIGNATUF Election Can	named entity stee of Florida. RE: Electronic mpaign Financing S AND DIRECT	ubmits this statement for the processing contribution (). CORS: Delete D DR	ent	Date
The above in the State SIGNATUF Election Can OFFICERS Title: Name: Address:	named entity stee of Florida. RE: Electronic npaign Financing S AND DIRECT D () I BELL, LARRY A. 13076 RAYMONI LOXAHATCHEE,	ubmits this statement for the processing contribution (). FORS: Delete D DR FL Delete M. Delete M. Delete	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: DALE L. BELL PRES 04/20/2009