

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jan 02, 2007
Secretary of State

DOCUMENT# P03000008741

Entity Name: EXODUS AIRWAYS INC

Current Principal Place of Business:

10901 NW 29 MANOR
SUNRISE, FL 33322

New Principal Place of Business:

10519 SAN TRAVASO DRIVE
TAMPA, FL 33647

Current Mailing Address:

10901 NW 29 MANOR
SUNRISE, FL 33322

New Mailing Address:

10519 SAN TRAVASO DRIVE
TAMPA, FL 33647

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHARLES, INGRID
2711 NW 87 AVE
CORAL SPRINGS, FL 33065 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: INGRID CHARLES

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSTON, DONNA M
Address: 10901 NW 29 MANOR
City-St-Zip: SUNRISE, FL 33322 US

Title: P (X) Change () Addition
Name: JOHNSTON, DONNA M
Address: 10519 SAN TRAVASO DRIVE
City-St-Zip: TAMPA, FL 33647 US

Title: D () Delete
Name: CLARKE, TIM
Address: 6175 SW 44 ST
City-St-Zip: DAVIE, FL 33314 US

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

Title: V () Delete
Name: CYRUS, ROY
Address: 20451 SW 1ST ST
City-St-Zip: PEMBROKE PINES, FL 33029 US

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

Title: V () Delete
Name: CORRICA, COLIN
Address: 145-16 176 ST
City-St-Zip: JAMAICA, NY 11434 US

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

Title: V () Delete
Name: ELIGON, LEON
Address: 5428 SW CATSKILL DRIVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

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

Title: D () Delete
Name: MUNGROO, NEISHA
Address: 2711 NW 87 AVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNA JOHNSTON

P

01/02/2007

Electronic Signature of Signing Officer or Director

Date