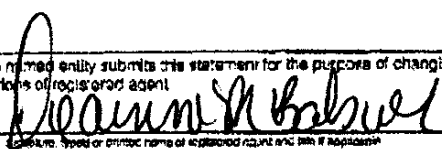
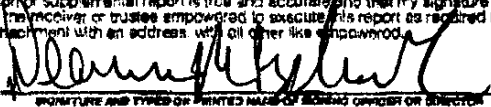


2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2005 OCT 10 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000020344					
1. Entity Name AIR AMERICA, INC.					
Principal Place of Business 7131 QUEEN PALM CIRCLE SARASOTA, FL 34243			Mailing Address 7131 QUEEN PALM CIRCLE SARASOTA, FL 34243		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 47-0915230			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☒ 88.75 Additional Fee Required			10052006 REIN-P CR2E388 (6/04)		
6. Name and Address of Current Registered Agent OZARK, DAMIAN M 2508 MANATEE AVENUE WEST BRADENTON, FL 34205			7. Name and Address of New Registered Agent Name: Deanne Babcock Street Address (P.O. Box addresses are not accepted): 7131 Queen Palm Cir City: Sarasota FL 34243		
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: 			DATE: 10-5-05		
FILE NOW!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	BABCOCK, DEANNE M		NAME	900060454229	
STREET ADDRESS	7131 QUEEN PALM CIRCLE		STREET ADDRESS	10/10/05--01067--006 **158.75	
CITY-ST-ZIP	SARASOTA, FL 34243		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SALZANO, MATTHEW D		NAME		
STREET ADDRESS	6324 24TH STREET COURT EAST		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34203		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 amendment with an address, with all other like empowerment.					
SIGNATURE: 			DATE: 10/5/05 941-757-3557		

10/1200