

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90100 024 ***155.00

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1. Entity Name

FIDELITY AIR INC.



Principal Place of Business

PO BOX 7454
DELRAY BEACH FL 33482

Mailing Address

PO BOX 7454
DELRAY BEACH FL 33482

20034177



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

680 Coral Way

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DELRAY Bch

City & State

Suite, Apt. #, etc.

Zip
FL 33445

Country
USA

Zip

Country

4. FEI Number

02-0710633

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANTENOR, PHONIC
680 CORAL WAY
DELRAY BEACH FL 33445

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVST ☐ Delete
NAME ANTENOR, PHONIC
STREET ADDRESS 680 CORAL WAY
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE Vice President ☐ Delete
NAME WILDA ANTENOR
STREET ADDRESS 680 CORAL WAY
CITY-ST-ZIP DELRAY Bch FL 33445

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVST ☐ Change ☐ Addition
NAME ANTENOR PHONIC
STREET ADDRESS 680 CORAL WAY
CITY-ST-ZIP DELRAY Bch FL 33445

TITLE WILDA ANTENOR ☐ Change ☒ Addition
NAME WILDA ANTENOR
STREET ADDRESS 680 CORAL WAY
CITY-ST-ZIP DELRAY Bch FL 33445

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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)(i), 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 all other like empowered.

SIGNATURE:

Phonic Antenor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-04

Date

583307737

Daytime Phone #