2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 09, 2006 08:00 AM DOCUMENT # P03000128441 **Secretary of State** AIR LOAD MANAGEMENT, INC. Mailing Address Principal Place of Business 8552 LANTANA AVE 8552 LANTANA AVE LARGO, FL 33777 LARGO, FL 33777 CR2E034 (11/05) 01072006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0226977 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALM, ERIC T DO NOT WRITE 8552 LANTANA AVE LARGO, FL 33777 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10 OFFICERS AND DIRECTORS DPT TITLE NAME ALM, ERIC T STREET ADDRESS 8552 LANTANA AVE CITY-ST-ZIP LARGO, FL 33777 000000380024 01/10/06-80044-022 150.00 SVP. TITLE ALM, JOYCE M NAME 8552 LANTANA AVE STREET ADDRESS LARGO, FL 33777 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cetti; 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:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME Street Address City-St-Zip

Eric) Um

ERICT. ALM

1-7-06

727-3929599

Deytime Phone #

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