

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140430

Entity Name: IONA AIR, INC.

FILED
Jun 23, 2004
Secretary of State

Current Principal Place of Business:

1063 S.E. 20TH PLACE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

1063 S.E. 20TH PLACE
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 20-0432924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BABB, BYRON
1063 S.E. 20TH PLACE
CAPE CORAL, FL 33990

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BABB, BYRON
Address: 1063 S.E. 20TH PLACE
City-St-Zip: CAPE CORAL, FL 33990

Title: D () Delete
Name: BABB, MICHELLE
Address: 1063 S.E. 20TH PLACE
City-St-Zip: CAPE CORAL, FL 33990

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BABB, BYRON
Address: 1063 S.E. 20TH PLACE
City-St-Zip: CAPE CORAL, FL 33990

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

Title: P () Change (X) Addition
Name: PARKIN, STEPHEN
Address: 9796 GLADIOLUS BULB LOOP
City-St-Zip: FT. MYERS, FL 33908

Title: S () Change (X) Addition
Name: WINDHAM, JAMES H
Address: 1142 EBONY ST. E.
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BYRON BABB

VP

06/23/2004

Electronic Signature of Signing Officer or Director

Date