## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000140430

Entity Name: IONA AIR, INC

FILED Apr 25, 2005 Secretary of State

		, 1140.			
Current Principal Place of Business:			New Principal Place of Business:		
	20TH PLACE RAL, FL 33990	)			
Current Mailing Address:			New Mailing Address:		
	20TH PLACE RAL, FL 33990	)			
FEI Number: 20-0432924 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	d Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
	RON 20TH PLACE RAL, FL 33990	) US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing it	s registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VP () BABB, BYRON 1063 S.E. 20TH CAPE CORAL,		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () BABB, MICHEL 1063 S.E. 20TH CAPE CORAL,	PLACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	P () PARKIN, STEPI 9796 GLADIOLI FT. MYERS, FL	JS BULB LOOP	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () WINDHAM, JAN 1142 EBONY S LEHIGH ACRES	T. E.	Title: Name: Address: City-St-Zip:	T (X) Change ( ) Addition WINDHAM, JAMES H 1142 EBONY ST. E. LEHIGH ACRES, FL 33936	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	S ( ) Change (X) Addition BABB, TODD A 15590 OCEAN WALK CR #307 FT MYERS, FL 33908	

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 D BABB VP 04/25/2005