## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 23, 2005 8:00 am Secretary of State

AIIIIOAL IIL. OII.					<del></del>	secretary of State			
DOCUMENT # P04000044425  1. Entity Name AIR AMBULANCE WORLDWIDE, INC.						03-23-2005 90043 015 ***150.00			
Principal Place of Business Mailing Address									
3046 ENISGLEN DR PALM HARBOR, FL 34683		27 E ORANGE STREET TARPON SPRINGS, FL 34689		1 (111(1111)	ODNI DIRU STUL DXII: COM I	1817) 8181) 8181) 81818 HARL BI	19 <b>2</b> 1 11 1 <b>88</b> 1		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03082005	Chg-P	CR2E034 (10/03)	. Ward Park		
City & State		City & State			4. FEI Number 20 -	0847160	No	plied For t Applicable	
Zip	Country Zip C  6. Name and Address of Current Registered Agent		Countr	у ————		of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current I	registered Agent		7. Name and Address of New Registered Agent Name					
KLIMIS, GEORGE N 27 E ORANGE ST				Street Address (P.O. Box Number is Not Acceptable)					
	SPRINGS, FL 34689			<del></del>	···		<u></u>		
	•	, Ci		City			FL Zip Code	9	
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									
FILE NOWIII FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.	•			CERS AND DIRECTOR	S IN 11	
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NAME	JONES, MARK		NAME	: ا	SUSAN R.S	rones		1	
STREET ADDRESS	3046 ENISGLEN DR		STREE	T ADORESS	3046 EN159	IEM PC			
CITY-ST-ZIP	PALM HARBOR, FL 34683		CTTY-	ST-ZIP	PAIM HAR	rones Ien PR Iok, Fl 346	8.5		
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CTY-ST-ZIP  12. I hereby certify that the information supplied with this filling does not qualify for the ex				ST-ZIP	Lin Coming 140 07(0)	(i) Florido Statutos 1	huthar cartify that the :	plarmatica	
iz. Inereb∀	Ceruiv that the information supplied with	i uns india does not quality for	пін вхаі	IIIJUUII STATOO	r ii r 38011011   19.07 (3)	ng, i iviida əldibles. I	rando contra statute i	···OIII (ELITO) I	

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 turther 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: MALK JONES 3/12/05 727-781-1198
SIGNATURE AND TYPED OR PRINTED NAME OF SKINNING OFFICER OR DIRECTOR

Date

District Director

Director

Director

Director

District Director

District Director