2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052423

Entity Name: GUARANTEED AIR, INC.

FILED Apr 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. 771104 568 S. EASY STREET CORAL SPRINGS, FL 33077 SEBASTIAN, FL 32958

Current Mailing Address: New Mailing Address:

P.O. BOX 771104 P.O. BOX 780960 SEBASTIAN, FL 32978

FEI Number: 20-4740659 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SLAVA, KIM G 568 S. EASY STREET SEBASTIAN, FL 32958 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: SLAVA, KIM G Name: SLAVA, KIM G

 Name:
 SLAVA, KIM G
 Name:
 SLAVA, KIM G

 Address:
 PO BOX 771104
 Address:
 PO BOX 780960

 City-St-Zip:
 CORAL SPRINGS, FL 33077
 City-St-Zip:
 SEBASTIAN, FL 32978

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 HAZIEN, RENEE M
 Name:
 HAZIEN, RENEE M

 Address:
 P.O. BOX 771104
 Address:
 P.O. BOX 780960

 City-St-Zip:
 CORAL SPRINGS, FL 33077
 City-St-Zip:
 SEBASTIAN, FL 32978

 Name:
 HAZIEN, OMAR C
 Name:
 HAZIEN, OMAR C

 Address:
 P.O. BOX 771104
 Address:
 P.O. BOX 780960

 City-St-Zip:
 CORAL SPRINGS, FL 33077
 City-St-Zip:
 SEBASTIAN, FL 32978

Title: S () Delete Title: S (X) Change () Addition

 Name:
 HAZIEN, ADAM L
 Name:
 HAZIEN, ADAM L

 Address:
 P.O. BOX 771104
 Address:
 P.O. BOX 780960

 City-St-Zip:
 CORAL SPRINGS, FL 33077
 City-St-Zip:
 SEBASTIAN, FL 32978

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RENEE HAZIEN VP 04/27/2008