2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109535

WOODS, SHENAY M

2301 CALEXICO WAY SOUTH

ST. PETERBURG, FL 33712

Name:

Address: City-St-Zip:

Entity Name: KINGDOM AIR, INC.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2301 CALEXICO WAY SOUTH ST. PETERBURG, FL 33712 **Current Mailing Address: New Mailing Address:** P. O. BOX 13226 ST. PETERBURG, FL 33733 FEI Number: 20-5396958 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: SHORT, PAUL R 1214 WEST BEARSS AVENUE TAMPA, FL 33613 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition WOODS, II, STEPHEN J Name: Name: 2301 CALEXICO WAY SOUTH Address: Address: City-St-Zip: ST. PETERBURG, FL 33712 City-St-Zip: Title: Title: () Change () Addition () Delete Name: WOODS, CHRISTOPHER J Name: 2301 CALEXICO WAY SOUTH Address: Address: ST. PETERBURG, FL 33712 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN J. WOODS, LL P 05/01/2008