PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		Secretar	TMENT (กร	FFR - 2	4,	J. O		
DOCUMENT # P 06049 1. Corporation Name AIR INTERNATIONAL INCORPORATED					SECRETARY OF STATE TALLAHASSEE, FLORIDA					·	
2. Principal Office Address ST PETERS REG / CLEARWATER INT'L Suite, Apt. #, etc.	PRESSURG/CLEARWATER INT'S 1943 NORTH 50TH STREET				1131587 ATTENENT 03-05						
ty & State City & State				4. Date Incorporated or Qualified To Do Business in Florida Beruse 2002							
CLEARWATER FLA	INGHAM AL			5. FEI Number Applied For 22 - 2575195 Not Applied be					1		
34622 USA	35212 USA				G. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status						
7. Name and Address of Current Registered Agent											
Street Address (P.O. Box Number is Not Acceptable) 120 HAYES STREET Suite, Apt. #, Etc. City TALLAHASSEE 8. I, being appointed the registered agent of the above named conception, am familiar with and accept the obj						02/16/0501001028 **T058.75 State Zip Code FL 3236 326 3					
Registered Agent Date 472/C 3									CR2E081 (01/04		
Titles Name of	Names and Street Addresses of Each Officer and/or Director (Fig. 1) Name of Officers and/or Directors			orida nonprofit corporations must list at least 3 directors Street Address of Each Officer and/or Director				City / State / Zip			
PD ARAMINI, ROMALD A		1943 NORTH 50TH STREET			TREET	BIRMINGHAM AL 36212					
T LEE, SOHN		1943 NORTH SOTH STE			DEET	EET BIRMINGHAM AL 35212					
5 Sewell, Doris K	Sewen, Doers K		1943 NORTH 50TH STREET			BIRMWAHAM AC 35212					
1. The market					ANALYSIA (A. 1971) LANGE SACTOR				i territoria di la loc		
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: Description Descript											