2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State
01-07-2008 90041 049 ***158.75

DOCUMENT # P33068

1. Entity Name
YOWELL INTERNATIONAL AIRLINES INC.

40000327

01042008 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
1 AEROSPACE DRIVE SUITE 2 MELBOURNE, FL 32901 US	PO BOX 1502 MELBOURNE, FL 32902 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
100 AEROSPACE DR	
Suite, Apt. #, etc. Suite 102	Suite, Apt. #, etc.
City & State Melbourne FL	City & State
Zip 32901 Country US	Zip Country

4. FEI Number
31-1070270
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
YOWELL, NEIL T JR. 1 AEROSPACE DRIVE SUITE 2 MELBOURNE, FL 32901	Name Street Address (P.O. Box Number is Not Acceptable) 100 AEROSPACE DR # 102 City: Melbourne FL Zip Code: 32901

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: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST YOWELL, CAROL 1 AEROSPACE DR STE 2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	100 AEROSPACE DR STE 102 MELBOURNE FL 32901
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V YOWELL, JAY 1 AEROSPACE DR STE 2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	100 AEROSPACE DR STE 102 MELBOURNE FL 32901
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YOWELL, STEVEN 1 AEROSPACE DR STE 2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	100 AEROSPACE DR SUITE 102 MELBOURNE FL 32901
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P YOWELL, NEIL T JR. 1 AEROSPACE DR STE 2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	100 AEROSPACE DR Suite 102 melbourne FL 32901
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CANTILLON, WILLIAM 1 AEROSPACE DR STE 2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition	100 AEROSPACE DR STE 102 MELBOURNE FL 32901
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #