

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 05, 2008 8:00 am
Secretary of State

08-05-2008 90003 024 ***150.00

DOCUMENT # P93000080869

1. Entity Name

SELECT AIR, INC.



Principal Place of Business

461 SILVER DEW ST
LAKE MARY FL 32746
US

Mailing Address

P O BOX 952412
LAKE MARY FL 32795
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number

59-3211726

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FALKENSTEIN, MARIE M.
461 SILVER DEW ST
LAKE MARY FL 32746

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 transferring)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	FALKENSTEIN, MARIE N	
STREET ADDRESS	461 SILVER DEW ST	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 of the corporation; and that my name appears in Block 10 or Block 11 if changed, or Attachment with an address, with all other officers and directors.

SIGNATURE: MARIE, N. FALKENSTEIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31 JULY 2008 407-323 6880
Date Daytime Phone #

ATTACHMENT

40112677
P93000080869

JULY 30, 2008 MISSING
CHECK, A CHECK IN THE AMOUNT OF \$150.00
WAS MAILED TO THE FLORIDA DEPARTMENT OF
STATE, THIS MAILING TOOK PLACE ON JAN 30, 2008,
REQUEST YOU WAIVE THE \$400.00 PENALTY FEE.
ENCLOSED IS OUR CHECK FOR \$150.00 TO COVER
THE REGULAR FEE.

SINCERELY,

EUGENE A. FALKENSTEIN, DIRECTOR
E.A. Falkenstein