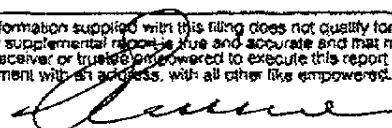


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000092034 1. Entity Name ESSENTIAL AIR SERVICES INTERNATIONAL INC.			
Principal Place of Business POST OFFICE BOX 622633 ORLANDO, FL 32862-2633		Mailing Address POST OFFICE BOX 622633 ORLANDO, FL 32862-2633	
DO NOT WRITE IN THIS SPACE			
04202004 No Chg-P CR2E034 (10/03)			
4. FEI Number 69-3487823		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NURSE, ROBERT L 4101 LINDY CIRCLE ORLANDO, FL 32827		DO NOT WRITE IN THIS SPACE	
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 retreating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		000000132767 04/27/04-80060-012 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST NURSE, ROBERT L POST OFFICE BOX 622633 ORLANDO, FL 328622633		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: 		Date 4/23/04 Daytime Phone # 407-857-8709	