2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73711

Entity Name: GOOD AIR INC

FILED Apr 23, 2007 Secretary of State

| | | 10110 | | | |
|-------------------------------------------------|--------------------------|--------------------------------|---------------------------------------------|----------------------------------------------|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 14211 S.W DAVIE, FL | V. 17TH STREE . 33325 | ĒΤ | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 14211 S.W DAVIE, FL | V. 17TH STREE . 33325 | ĒΤ | | | |
| FEI Number | : 65-0370861 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address o | Name and Address of New Registered Agent: | |
| 10200 ST SUITE 107 DAVIE, FL The above | 7 . 33324 US | | urpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| Election Car | mpaign Financing | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | KHAN, MOHAM | D 84, SUITE 107 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | KHAN, NUSRAT | D 84, SUITE 107 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: | V () KHAN, YASIR A | Delete | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: NUSRAT KHAN DVS 04/23/2007

14211 S.W. 17TH STREET

DAVIE, FL 33325

Address: City-St-Zip: