

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000041893

Entity Name: EXPO-AIRE, INC.**Current Principal Place of Business:**7724 NW 112 PL
DORAL, FL 33178**Current Mailing Address:**7724 NW 112 PL
DORAL, FL 33178 US**FEI Number:** 65-0846580**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAMARGO, JOSE F
7724 NW 112 PLACE
DORAL, FL 33178 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|-----------------|
| Title | DP |
| Name | CAMARGO, JOSE F |
| Address | 7724 NW 112 PL |
| City-State-Zip: | DORAL FL 33178 |

| | |
|-----------------|-------------------|
| Title | DVP |
| Name | CAMARGO, JOHANN J |
| Address | 7724 NW 112 PL |
| City-State-Zip: | DORAL FL 33178 |

| | |
|-----------------|----------------|
| Title | DS |
| Name | REYES, EDITH M |
| Address | 7724 NW 112 PL |
| City-State-Zip: | DORAL FL 33178 |

| | |
|-----------------|-------------------|
| Title | DT |
| Name | CAMARGO, JONATHAN |
| Address | 7724 NW 112 PL |
| City-State-Zip: | DORAL FL 33178 |

I hereby 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 all other like empowered.

SIGNATURE: JOSE F CAMARGO**DIRECTOR****04/26/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date