

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001865

Entity Name: AIRFLOW SCIENCES CORPORATION**Current Principal Place of Business:**12190 HUBBARD STREET
LIVONIA, MI 48150-1737**Current Mailing Address:**12190 HUBBARD STREET
LIVONIA, MI 48150-1737 US**FEI Number:** 38-2083056**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HIGGINS, MICHAEL E
1906 ARROWHEAD DRIVE NE
ST PETERSBURG, FL 33703-1904 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	ST
Name	NELSON, ROBERT K
Address	12190 HUBBARD STREET
City-State-Zip:	LIVONIA MI 48150-1737

Title	P
Name	MUDRY, ROBERT G
Address	12190 HUBBARD STREET
City-State-Zip:	LIVONIA MI 48150-1737

Title	D
Name	BANKA, ANDREW L
Address	12190 HUBBARD STREET
City-State-Zip:	LIVONIA MI 48150-1737

Title	D
Name	DUMONT, BRIAN J
Address	12190 HUBBARD STREET
City-State-Zip:	LIVONIA MI 48150-1737

Title	D
Name	LINFIELD, KEVIN W
Address	12190 HUBBARD STREET
City-State-Zip:	LIVONIA MI 48150-1737

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: ROBERT G. MUDRY**PRESIDENT****02/28/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date