

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003573

FILED
May 26, 2006
Secretary of State

Entity Name: AIR HYGIENE INTERNATIONAL, INC.

Current Principal Place of Business:

5634 S 122ND EAST AVE., SUITE F
TULSA, OK 74146

New Principal Place of Business:

Current Mailing Address:

5634 S 122ND EAST AVE., SUITE F
TULSA, OK 74146

New Mailing Address:

FEI Number: 73-1515305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAHLENKAMP, JAKE
239 EASTON CIRCLE
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BIERMAN, QUINN A
Address: 5634 S 122ND EAST AVE., SUITE F
City-St-Zip: TULSA, OK 74146

Title: V () Delete
Name: BIERMAN, RICHARD S
Address: 5634 S 122ND EAST AVE., SUITE F
City-St-Zip: TULSA, OK 74146

Title: S () Delete
Name: WHITWORTH, NEIL
Address: 5634 S 122ND EAST AVE., SUITE F
City-St-Zip: TULSA, OK 74146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DAVIS, CLINT
Address: 5634 S 122ND EAST AVE., SUITE F
City-St-Zip: TULSA, OK 74146

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.

SIGNATURE: CLINT DAVIS

S

05/26/2006

Electronic Signature of Signing Officer or Director

Date