

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J44642

Entity Name: EXPERT-AIRE, INC.

FILED  
Jan 18, 2012  
Secretary of State

**Current Principal Place of Business:**

5710 SHIRLEY ST  
NAPLES, FL 34109 US

**New Principal Place of Business:**

**Current Mailing Address:**

5710 SHIRLEY ST  
NAPLES, FL 34109 US

**New Mailing Address:**

FEI Number: 59-2814013

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUKOSAVICH, EDWARD  
6655 BOTTLEBRUSH LN  
NAPLES, FL 34109 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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: LUKASAVICH, EDWARD  
Address: 6655 BOTTLEBRUSH LN.  
City-St-Zip: NAPLES, FL 34109

Title: CVST  
Name: LUKOSAVICH, GAIL F  
Address: 6655 BOTTLEBRUSH LN.  
City-St-Zip: NAPLES, FL 34109

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: GAIL F LUKOSAVICH

CVST

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date