2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034759

Entity Name: HYDROXYL AIR SOLUTIONS, LLC

Current Principal Place of Business:

8313 VOLUSIA PLACE
TAMPA, FL 33637

New Principal Place of Business:

14505 COMMERCE WAY
SUITE 400
MIAMI LAKES, FL 33016

Current Mailing Address:

8313 VOLUSIA PLACE
TAMPA, FL 33637

New Mailing Address:

14505 COMMERCE WAY
SUITE 400
MIAMI LAKES, FL 33016

FEI Number: 35-2337732   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCARDLE, GEORGE
201 ALHAMBRA CIRCLE, SUITE 711
CORAL GABLES, FL 33134   US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301   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: KATIE WONSCH   01/13/2010

_____   _____
Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MCARDLE, THOMAS F
Address: 14505 COMMERCE WAY, #400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR
Name: MCARDLE, MICHAEL
Address: 14505 COMMERCE WAY, #400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR
Name: GIPE, TIMOTHY
Address: 14505 COMMERCE WAY, #400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR
Name: WALRAD, EDWIN E
Address: 14505 COMMERCE WAY, #400
City-St-Zip: MIAMI LAKES, FL 33016

Title: MGR
Name: BAILEY, CAROLYN
Address: 14505 COMMERCE WAY, #400
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: EDWIN E WALRAD   CFO   01/13/2010

_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date