


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000016437		
1. Entity Name AIR MASTER, INC.		
Principal Place of Business 15366 SW 21 PLACE MIRAMAR, FL 33027		Mailing Address 15366 SW 21 PLACE MIRAMAR, FL 33027
DO NOT WRITE IN THIS SPACE		
<div style="text-align: right;">01172006 No Chg-P CR2E034 (11/05)</div> <div style="display: flex; justify-content: space-between;"><div>4. FEI Number 65-1075553</div><div>Applied For <input type="checkbox"/> Not Applicable</div></div> <div style="display: flex; justify-content: space-between;"><div>5. Certificate of Status Desired <input type="checkbox"/></div><div>\$8.75 Additional Fee Required</div></div>		
6. Name and Address of Current Registered Agent VALDES, CARLOS 15366 SW 21 PLACE MIRAMAR, FL 33027		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when re-filing) <small>Signature, typed or printed name of registered agent and title if applicable</small> DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		000000396195 01/27/06-80023-002 150.00
10. OFFICERS AND DIRECTORS		
TITLE	PD	
NAME	VALDES, CARLOS	
STREET ADDRESS	15366 SW 21 PLACE	
CITY-ST-ZIP	MIRAMAR, FL 33027	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Carlos Valdes</u> 1/17/06 885-9777 (954)		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>		