## 2003 FOR PROFIT CORPORATION

	THOLL COMPONA	
UNIFORM	BUSINESS REPORT	(U
DOCUMENT #	P02000078202	
1. Entity Name AIRE DIAGNOSTICS, II	NC.	ŀ

Principal Place of Business

128 N HWY 79

PANAMA CITY REACH EL 32413

Mailing Address 128 N HWY 79

DANAMA CITY REACH EL 32413

PANAMA CITT BEACE	1 FL 32413	PANAMA OILI BE	NON FL 32413				
2. Principal Place of	Business	3. Mailing Address	3				
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State	-	City & State		_			
Zip	Country	Zip	Country				

**FILED** Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90136 038 \*\*\*150.00

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2. Principal P	cipal Place of Business 3. Mailing Address					- - -						
Suite, Apt.	e, Apt. #, etc. Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES						
City & State City & State							4. FEI Number Applied Applied Not App					
Zip		Country	Zip	Zip Cour					ertificate of Status Desired		\$8.75 Additional Fee Required	
	6. Name ai	nd Address of Curi	rent Registere	ed Agent	· —			7. Na	me and Address of Nev	v Registered A	gent	
						Name			<u> </u>			
CARNLEY	, QUINCY				-	0	1.1	20.0		1. I - N		
128 N HW	VY 79	•				Street A	daress (F	J.O. Box	x Number is Not Accepta	ble)		
	CITY BEACH	FL 32413							<u> </u>			
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						City				FL	Zip Co	ode
the obligat	tions of registere				s registere				nt, or both, in the State of	Florida. I am fa	miliar wit	h, and accept
<u> </u>	<del></del>			(NO)	C. Nogratered					DATE		
* =		FEE IS \$150.00							9. Election Campaign	Financing	\$5	. <b>00</b> May Be
Atte		Fee will be \$550		]				]	Trust Fund Contribu	~ —		led to Fees
Make Check	K Payable to F	iorida Departmer										
10.		OFFICERS A	AND DIRECTO	RS	11.		_		ITIONS/CHANGES TO C			
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NAME	CARNLEY, R				NAME		Keg	ena J	Carnley Huy 79			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachmen with an address, with all other like empowered.

SIGNATURE: