

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052265

Entity Name: ASAP HOME RESPIRATORY INC.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

5135 ADANSON ST
#200
ORLANDO, FL 32804 US

New Principal Place of Business:

12157 LINEBAUGH AVE.
#309
TAMPA, FL 33626 US

Current Mailing Address:

12157 LINEBAUGH AVE
#309
TAMPA, FL 33626 US

New Mailing Address:

FEI Number: 54-2109331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, REID
5135 ADANSON ST
#220
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

MACCLELLAN, ROGER
12157 LINEBAUGH AVE.
#309
TAMPA, FL 33626 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: ROGER MACCLELLAN 04/26/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: GRAY, REID
Address: 5135 ADANSON ST #200
City-St-Zip: ORLANDO, FL 32804 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MACCLELLAN, ROGER
Address: 12157 LINEBAUGH AVE. #309
City-St-Zip: TAMPA, FL 33626

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: ROGER MACCLELLAN P 04/26/2007
Electronic Signature of Signing Officer or Director Date