2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# P04000034594

Entity Name: ARROW INDOOR AIR ANALYSIS, INC.

Current Principal Place of Business:

5595 SCHENCK AVE.
SUITE 7
VIERA, FL 32940

New Principal Place of Business:

1582 LARAMIE CIR
VIERA, FL 32940

Current Mailing Address:

5595 SCHENCK AVE.
SUITE 7
VIERA, FL 32940

New Mailing Address:

1825 LARAMIE CIR
VIERA, FL 32940

FEI Number: 27-0079666 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHARROW, MICHAEL G
441 WENTHROP CIRCLE
ROCKLEDGE, FL 32955 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SHARROW, MICHAEL G
Address: 441 WENTROP CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete
Name: CARON, MICHELLE M
Address: 15 CATLIN DRIVE
City-St-Zip: BRUNSWICK, ME 04011

Title: D ( ) Delete
Name: SHARROW, MICHAEL G
Address: 441 WENTHROP CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL G. SHARROW PRES 05/06/2009

Electronic Signature of Signing Officer or Director Date