

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000051036

Entity Name: SECUREAIRE INC.

FILED  
Jun 10, 2009  
Secretary of State

## Current Principal Place of Business:

11214 BLOOMINGTON DR  
TAMPA, FL 33635 US

## New Principal Place of Business:

## Current Mailing Address:

11214 BLOOMINGTON DR  
TAMPA, FL 33635 US

## New Mailing Address:

FEI Number: 20-0973741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HESS, DON  
11214 BLOOMINGTON DR  
TAMPA, FL 33635 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: DON HESS

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: ST ( ) Delete  
Name: WEGENER, FRANK L  
Address: 4780 FRUITVALE RD  
City-St-Zip: NEWCASTLE, CA 95658 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: OFFI ( ) Change (X) Addition  
Name: MUSTAIN, REX  
Address: 14900 WEST 107TH STREET ,  
City-St-Zip: LENEXA, KS 66215 US

Title: OFFI ( ) Change (X) Addition  
Name: WIXSON, MIKE  
Address: 14900 WEST 107TH ST  
City-St-Zip: LEXANA, KS 66215 US

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: DON HESS

Electronic Signature of Signing Officer or Director

PRE

06/10/2009

Date