## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000066774

Entity Name: TECH AIR OF SOUTH FLORIDA INC.

FILED Apr 14, 2008 Secretary of State

Current Pi	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
4500 SW 7 MIAMI, FL					
Current M	ailing Addres	ss:	New Mailing Address	New Mailing Address:	
4500 SW 7 MIAMI, FL					
FEI Number:	20-1038744	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ABREU, AI 9301 SW 9 MIAMI, FL	2ND AVE, AP	T A317	ABREU, ALICIA 9301 SW 92ND AVE, A MIAMI, FL 33176 US		
	named entity : e of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				04/14/2008	
	Electror	nic Signature of Registered Ag	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) ABREU, JOSE 9301 SW 92 AV MIAMI, FL 331		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DS ( ) ABREU, ALICIA 9301 SW 92 AV MIAMI, FL 331	/E	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DV () ABREU, JOHN 9751 SW 96 C MIAMI, FL 331		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DT ( ) ABREU, CARLO 9751 SW 96 C MIAMI, FL 331	Γ	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: ALICIA ABREU DS 04/14/2008