

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2005 8:00 am
Secretary of State

08-16-2005 90038 033 ***150.00

DOCUMENT # P04000130435

1. Entity Name

AD-VANC INDOOR AIR QUALITY INC.



Principal Place of Business

4418 BRANDON RIDGE DR.
VALRICO FL 33594

Mailing Address

4418 BRANDON RIDGE DR.
VALRICO FL 33594



2. Principal Place of Business

4418 Brandon Ridge Dr

3. Mailing Address

3433 Lithia Pinecrest Rd

Suite, Apt. #, etc.

↓

Suite, Apt. #, etc.

327

City & State

Valrico, FL

City & State

Valrico, FL

Zip

33594

Country

U.S.A

Zip

33594

Country

U.S.A

1st MOORE

CR2E034 (10/04)

4. FEI Number

14-1915528

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME SHAMLALL, SUZON
STREET ADDRESS 4418 BRANDON RIDGE DR.
CITY-ST-ZIP VALRICO FL 33594

TITLE VD ☐ Delete
NAME SHAMLALL, GOUTAM
STREET ADDRESS 4418 BRANDON RIDGE DR.
CITY-ST-ZIP VALRICO FL 33594

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07/25/05 (813) 689-2600

ATTACHMENT

~~50061268~~
P04000130435

Dear Sir / Madam

We apologize for
being late. This is
our first year of
reporting as soon as we
received this notice we
sent it right away

Thank you

D. Shaukull