2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130435

3336 SPY TOWER CT

VALRICO, FL 33594

Address: City-St-Zip:

Entity Name: AD-VANC INDOOR AIR OLIALITY INC

FILED Aug 27, 2008 Secretary of State

Littly Nai	ille. AD-VAIN	S INDOOR AIR QUALITY INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4418 BRAI VALRICO,	NDON RIDGE FL 33594	DR.			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3433 LITH # 327 VALRICO,	IA PINECRES FL 33594	TRD			
FEI Number:	: 14-1915528	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	OR 33145 US named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATOR		nic Signature of Registered Age	ent	Date	
Election Car	ce with s. 607.19 mpaign Financin	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTD (SHAMLALL, SI 4418 BRANDO VALRICO, FL	N RIDGE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (SHAMLALL, GO 4418 BRANDO VALRICO, FL	N RIDGE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP (SHAMLALL, JU) Delete ISTIN	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: JOHN SHAMLALL V.P. 08/27/2008