2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000079259

Entity Name: ESSENTIAL AIRE, INC.

FILED Mar 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2104 N. FEDERAL HWY 2048 SW 28 TERRACE SUITE A FT. LAUDERDALE, FL 33312 US HOLLYWOOD, FL 33020 US **New Mailing Address: Current Mailing Address:** 2104 N. FEDERAL HWY 2048 SW 28 TERRACE SUITE A FT. LAUDERDALE, FL 33312 US HOLLYWOOD, FL 33020 US FEI Number: 20-3666492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EVENSTAR, INC 2048 SW 28 TERRACE FT. LAUDERDALE, FL 33312 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition FURLONG, CLAUDE ROBERTSON, ROSE Name: Name: 2750 OCEAN DRIVE #206 2048 SW 28 TERRACE Address: Address: City-St-Zip: HOLLYWOOD, FL 33020 US City-St-Zip: FT. LAUDERDALE, FL 33312 US Title: VΡ Title: () Delete (X) Change () Addition Name: ROBERTSON, ROSE Name: LURIA MAYRA S 2048 SW 28 TERRACE 2048 SW 28 TERRACE Address: Address: FT. LAUDERDALE, FL 33312 US FT. LAUDERDALE, FL 33312 US City-St-Zip: City-St-Zip: Title: D (X) Delete Title: () Change () Addition DUMAIS, JAQUES Name: Name: 1424 NW 113 WAY Address: Address: City-St-Zip: PEMBROKE PINE, FL 33026 US City-St-Zip: Title: (X) Delete Title: () Change () Addition TAN, LILY Name: Name: 581 SW 63RD TERRACE Address: Address: City-St-Zip: PLANTATION, FL 33317 US City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: LURIA, MAYRA S Name: 2048 SW 28 TERRACE Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33312 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MAYRA S. LURIA VP 03/07/2006