2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118026

Entity Name: ROYALAIRE MECHANICAL SERVICES, INC.

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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2120 CALUMET ST. 111 DUNBAR AVENUE

SUITE #1 UNIT A
CLEARWATER, FL 33765 UNIT A
OLDSMAR, FL 34677

Current Mailing Address: New Mailing Address:

2120 CALUMET ST.

SUITE #1

CLEARWATER, FL 33765

111 DUNBAR AVENUE
UNIT A
OLDSMAR, FL 34677

FEI Number: 20-5530209 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:

FIELDS, JOHN D
2120 CALUMET ST
SUITE #1
CLEARWATER, FL 33765 US
FIELDS, JOHN D
111 DUNBAR AVENUE
UNIT A
OLDSMAR, FL 34677 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: JOHN D FIELDS 02/07/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 FIELDS, JOHN D
 Name:
 FIELDS, JOHN D

 Address:
 2120 CALUMET ST
 Address:
 111 DUNBAR AVENUE

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 OLDSMAR, FL 34677

 Name:
 FOLEY, MICHAEL
 Name:
 FOLEY, MICHAEL

 Address:
 2120 CALUMET ST
 Address:
 111 DUNBAR AVENUE

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 OLDSMAR, FL 34677

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BLUME, DARYL W
 Name:
 BLUME, DARYL W

 Address:
 2120 CALUMET ST.
 Address:
 111 DUNBAR AVENUE

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 OLDSMAR, FL 34677

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ALLEN, DANIEL
 Name:
 ALLEN, DANIEL

 Address:
 2120 CALUMET ST.
 Address:
 111 DUNBAR AVENUE

 City-St-Zip:
 CLEARWATER, FL 33765
 City-St-Zip:
 OLDSMAR, FL 34677

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: JOHN FIELDS T 02/07/2007