

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90007 011 ***158.75

DOCUMENT # P29806

1. Entity Name

SPRING AIR PRODUCTS INTERNATIONAL, INC.



Principal Place of Business

7717 INDUSTRIAL
WEST MELBOURNE FL 32904
US

Mailing Address

7717 INDUSTRIAL
WEST MELBOURNE FL 32904
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

91-1431696

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WATTON, WILLIAM
82 PARKHILL BLVD W
MELBOURNE FL 32901

Name: WILLIAM WATTON

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

City: SATELLITE BEACH

FL

Zip Code: 32937

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, 2006 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME WATTON, WILLIAM
STREET ADDRESS 82 PARKHILL BLVD W
CITY-ST-ZIP MELBOURNE FL ☒ Delete

TITLE PD
NAME WATTON, WILLIAM
STREET ADDRESS 130 ELM AVENUE
CITY-ST-ZIP SATELLITE BEACH, FL. ☒ Change ☐ Addition

TITLE VD
NAME WATTON, I.M.
STREET ADDRESS 82 PARKHILL BLVD W
CITY-ST-ZIP MELBOURNE FL ☒ Delete

TITLE VD
NAME WATTON, I.M.
STREET ADDRESS 130 ELM AVENUE
CITY-ST-ZIP SATELLITE BEACH, FL. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *W. Watton* W. Watton Pres.

1/30/06

728-9002