

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090894 (3)

1. Corporation Name

LIVING AIR ENVIRONMENTAL SERVICES, INC.



Principal Place of Business

Mailing Address

~~10400 SW 108TH AVE #A-302~~
~~MIAMI FL 33176~~

~~10400 SW 108TH AVE #A-302~~
~~MIAMI FL 33176~~

1010 SW 46th Ave #101

1010 SW 46th Ave #101

Pompano Beach, FL 33069

Pompano Beach, FL 33069

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RASH, DAVID

~~10400 SW 108TH AVE #A-302~~
~~MIAMI FL 33176~~

1010 SW 46th Ave #101

Pompano Beach, FL 33069

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

David Rash

Signature typed or printed name of registered agent and the filer.

(20) Registered Agent signature required when changing.

4/30/96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PVST**
STREET ADDRESS **RASH, DAVID**
CITY - ST - ZIP **10400 SW 108TH AVE #A-302**
MIAMI FL 33176

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ DELETE
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STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **1010 SW 46th Ave #101**
1.4 CITY - ST - ZIP **Pompano Beach, FL 33069**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS

2.4 CITY - ST - ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS

3.4 CITY - ST - ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS

4.4 CITY - ST - ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS

5.4 CITY - ST - ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David Rash

DAVID RASH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 954 969-1135

DATE DAYTIME PHONE #

CR2E034 (12/95)