

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000096384

FILED  
Jan 24, 2008  
Secretary of State

**Entity Name:** INDOOR ENVIRONMENTAL SYSTEMS, INC.

**Current Principal Place of Business:**

6975 SE HARBOR CR  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

7601 SW LOST RIVER RD  
STUART, FL 34997

**New Mailing Address:**

6975 SE HARBOR CR  
STUART, FL 34996

**FEI Number:** 65-0718855

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERLSTEIN, ARNOLD L  
441 MONTCLAIRE DR  
WESTON, FL 33326 US

**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete  
Name: SCOTT, TABOR  
Address: 6975 SE HARBOR CT  
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete  
Name: TABOR, MARTIN A  
Address: 7601 SW LOST RIVER RD  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

**SIGNATURE:** SCOTT TABOR

PD

01/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date