

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90027 001 \*\*\*\*61.25

**DOCUMENT # 734492**

1. Entity Name

**AIR CONDITIONING CONTRACTORS OF AMERICA, GOLD CO**

Principal Place of Business

Mailing Address

1650 SOUTH DIXIE HIGHWAY  
 5TH FLOOR  
 BOCA RATON FL 33432  
 US

1650 SOUTH DIXIE HIGHWAY  
 5TH FLOOR  
 BOCA RATON FL 33432  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2778128**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FERRIERA, DONALD M**  
**1650 SOUTH DIXIE HIGHWAY**  
**5TH FLOOR**  
**BOCA RATON FL 33432**

Name

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

City

**FL**

Zip Code

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.

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 \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>LINDSTROM, DOUGLAS S</b> <b>6601 LYONS RD., SUITE D8</b> <b>COCONUT CREEK FL 33073</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>KROHN, BARRY</b> <b>1049 NW 3RD STREET</b> <b>HALLANDALE FL 33009</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>GUZMAN, EMILIO F</b> <b>4613 SW 74TH AVE</b> <b>MIAMI FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M</b> <b>FERRIERA, DONALD M</b> <b>1650 SOUTH DIXIE HIGHWAY 5TH FLOOR</b> <b>BOCA RATON FL 33432</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD</b> <b>CALLEJA, OSCAR</b> <b>5501 NW 82ND KAVE</b> <b>MIAMI FL 33166</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STD</b> <b>SUSAN BECKETT</b> <b>5601 N. POWERLINE RD, STE # 408</b> <b>FORT LAUDERDALE, FL 33309</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>GEORGE GARDINA</b> <b>1000 E. BROWARD BLVD</b> <b>FORT LAUDERDALE, FL 33301</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: *Donald M Ferreira* **SIGNATURE REQUIRED** Donald M Ferreira, Exec Dir 3/30/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)