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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G80512

(8)

ASPEN AIR CONDITIONING, INC. Principal Place of Business Mailing Address 3999 NORTH DIXIE HIGHWAY 3999 NORTH DIXIE HIGHWAY **BOCA RATON FL 33431 BOCA RATON FL 33431-4520** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/09/1983 05/01/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2352488 26 Not Applicable Suite, Apl. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 П Trust Fund Contribution Added to Fees Zin Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Yes No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MAGUIRE, STEVEN 81 Name 3999 NORTH DIXIE HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE THILE 1.1 TITLE Change ☐ Addition MAGUIRE. STEVEN NAME 1.2 NAME 3999 N DIXIE HWY STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY - ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change THILE Addition 2.1 TITLE MAGUIRE, STEVEN NAME 2.2 NAME 3999 N DIXIE HWY STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** DITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE MAGUIRE, PATRICIA NAME 3.2 NAME 3999 N DIXIE HWY STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE TITLE Addition 4.1 TITLE RIMEL. STEPHEN NAMA 4. 2 NAME 3999 N DIXIE HWY STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL** CITY - S1 - ZIP 4.4 CITY-ST-ZIP DELETE FILE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP TILLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the seceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

Lam an officer or director of the corporation or appears in Block 12 or Block 13 if changed

C)TY - ST - Z)6

an attachment with an address.

J-MALURU 561-395-1500 (96/6)

FILED

Feb 28 1997 8:00am

Secretary of State