FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

H51545

(2)

AIR CONDITIONING ASSOCIATES.INC.

FILED Apr 11 1997 8:00am Secretary of State

										·
Principal Pla	ace of Busi	ness		Mailing	Address		····			-
	3601	N.W.10t	h Ave		01 N.W.					
	FT. I	_Auderda		Fο	rt Laud	erd				
			33309				33	30	9	Date Incorporated or Qualified
				•						04-10-85 1-96
2. Principal	Place of B	usiness		2a. Mail	ing Address					4. FEI Number Applied For
21				26						59-2524901 Not Applicable
Suite, Ap	of #, etc		ŀ	Suite 27	e. Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required
City & Si	ale				& State			·		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		Country		Zip		777	Country			8. This corporation has liability for intangible tax under s. 199.032,
24		25		29		30	-			Florida Statutes Yes No
	9. Na	me and Address	of Current R	egistered	Agent					10. Name and Address of New Registered Agent
	DPS						81	Na	ne	
	3884	Kirkpat	Eickve	!			82	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)
		LAuderd		lori			B3	L		
				333	09		84			
										FL 85 Zip Code
11. Pursuar	of to the pro	ovisions of Section	s 607.0502 at	nd 607.15	08, Florida Stati	utes, the	above	e-nan	ed corpo	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent 1	Lantiar la	r with, and accept	the obligation	ns of, Sec	tion 607.0505, F	lorida S	Statutes	S.	201 por acc	on a board or directors. Thereby accept the appointment as registered
SIGNATURE										
12.	Cognistics 1s	god ar profest succe et a OCE to	cers and by				dered Age 3.	ent sign	eture require	ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	DPS	0.11			DELETE		1 TITLE			Change Addition
NAMi	Kirk	patrick,	John			1	2 NAME			_ · · -
STREET ADDRESS		NW 10th				1	3 STREET	ADDRE	ss	
(11Y+\$1+2IF	Fort	Lauderda	ale FL	333	09	1	4 CITY - S	ST-21P		•
TILF	VΤ				DELETE	2	1 TITLE			Change Addition
NAME	KIrk	oatrick,	Lucy			2	2 NAME			
STREET ADOREST	⁵₿601	NW 10th	Ave			. 2	3 STREET	ADORE	\$S	
Olv 81 72	fort.	LAuderda	ale FL	333	09		4 CITY-S	ST-ZIP		
Dict					DEFELE		1 TITLE			Change Addition
NAME							2 NAME			
STREET AFOREST							3 STREET		SS	
CHY ST ZIE TITLE					DELETE		4 CITY-S 1 TITLE	51 - ZIP		Change Addition
NAME							2 NAME			
STEFF ACCES						- 1	3 STREET	AUDer	ss	(X. MX).
01 6 - 201							4 CITY-S		~	
1001					DELETE		1 TITLE			☐ Change ☐ Addition
NAME						5	2 NAME			····
STELL ADDRESS						5	3 STREET	ADDRE	ss	
onris Ze						5	4 CITY - S	ST - ZIP		
TIT. F			,		DELETE	6	1 TITLE			Change Addition
NAMI						6	2 NAME			「UUUU ८1414 1 _04/14/9701004025
SPICE ALTONES						6	3 STREET	ADDRE	ss	700002141417 -04/14/9701004025 ***165.00
011Y St 7II:							4 CITY - S			
is motini es mail	t ori inflicate Lefficer or c	ed on this annual r	eport or supportation or the	olementat Fredeiver i	ännual report is or trustee empo	true an wered t	d accu	urate .	and that i	in Section 119.07(3)(i), Florida Statutes. I further certify that the my signature shall have the same legal effect as if made under path; that as required by Chapter 607, Florida Statutes; and that my name