

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

CORPORATION  
ANNUAL REPORT  
1995



DEPARTMENT OF STATE  
CORPORATION  
DIVISION

**APPROVED  
AND  
FILED**

95 MAY -1 AM 9:26

DOCUMENT # **K95288** (2)

ALL-STAR AIR CONDITIONING & APPLIANCE CO., INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4720-D OAKES ROAD  
DAVIE FL 33314

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DAVIE FL 33314

DO NOT WRITE IN THESE SPACES

3. Date Incorporated or Qualified <b>06/14/1989</b>	3a. Date of Last Report <b>04/18/1994</b>
4. FID Number <b>65-0133515</b>	Approved For Not Applicable
5. Certificate of Status Required	<b>\$8.75 Additional Fee Required</b>
6. Uniform Franchise Offering Circular Filed for Registration	<b>\$5.00 May Be Added to Fees</b>
8. Annual Report Due Date <b>4/18/95</b>	

21. Principal Office Address <b>5000 OAKES ROAD BAY G</b>	2a. Mailing Address <b>5000 OAKES ROAD BAY G</b>
22. State of Principal Office	27. State of Mailing Address
23. Principal Office City	28. Mailing Address City
24. Principal Office State	29. Mailing Address State
25. Principal Office Zip	30. Mailing Address Zip

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEFKOWITX, DENNIS S ESQ.  
2295 CORPORAE BLVD. N.W.  
#120  
BOCA RATON FL 33431

B1. Name	
B2. Street Address (Do Not Indicate If U.S. Registered)	
B3. City	
B4. State	<b>FL</b>
B5. Zip	

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above is a true and correct copy of the annual report of the corporation as required by law, and that the same has been approved by the board of directors of the corporation, and that the undersigned is a duly qualified and authorized agent of the corporation to execute this report and to file the same with the Secretary of State of the State of Florida.

12. Name of Officer	P	LEO, JOSEPH A.
13. Address of Officer		11907 S.W. 48TH COURT COOPER CITY FL
14. Name of Officer	S	LEO, GATHY-W.
15. Address of Officer		11907 S.W. 48TH COURT COOPER CITY FL

13. Name of Officer		
14. Address of Officer		7400 STIRLING ROAD #1517 DAVIE, FL. 33314
15. Name of Officer		DELETE

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above is a true and correct copy of the annual report of the corporation as required by law, and that the same has been approved by the board of directors of the corporation, and that the undersigned is a duly qualified and authorized agent of the corporation to execute this report and to file the same with the Secretary of State of the State of Florida.

SIGNATURE: *Joseph A. LEO*  
ORIGINAL AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 4/26/95 ✓ 327 8881