

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 NOV -6 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000053422

1. Entity Name

MIAMI BREEZE AIR CONDITIONING, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8430 NW 68th St

Suite, Apt. #, etc.

3

3. Mailing Address

5202 SW 127th Ct

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33166

Country

USA

Zip

33175

Country

USA

4. FEI Number

65-1013861

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Maria C. Campadonico

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

5202 SW 127th Ct

City

Miami

FL

Zip Code

33175

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

Maria C. Campadonico

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/29/02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$350.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME Jack G Campadonico
STREET ADDRESS 5202 SW 127th Ct Miami, FL 33175
CITY-ST-ZIP

TITLE VD
NAME Joseph Camnadonico
STREET ADDRESS 5202 SW 127th Ct
CITY-ST-ZIP Miami, FL 33137

TITLE SD
NAME Maria C Campadonico
STREET ADDRESS 5202 SW 127th Ct Miami FL 33175
CITY-ST-ZIP

TITLE T
NAME Tony Campadonico
STREET ADDRESS 5202 SW 127th Ct
CITY-ST-ZIP Miami, FL 33175

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CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address with all other like empowered.

SIGNATURE

Jack G. Campadonico

Jack G. Campadonico

10/29/02 305/553.7328

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

October 29, 2002

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: P00000053422, Miami Breeze Air Conditioning, Inc.

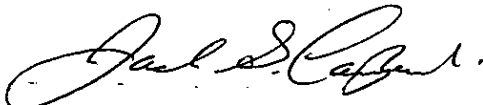
Dear Sir/Madam:

According to our conversation with your office, this is to request a waiver of the reinstatement fee of Miami Breeze Air Conditioning, Inc.

As we mentioned in our phone call, we found out that our company was under administrative dissolution for annual report while surfing the net. We never received any notice from your office.

Attached is the URB we downloaded from you website duly executed, as well as our check in the amount of \$150.00.

Thank you for your assistance in this matter.



Jack G Campadonico
President