

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90726 019 ***150.00

SAME

DOCUMENT # P0000083146 1. Entity Name AIR FORCE HEATING & COOLING OF SW FL, INC.			
Principal Place of Business 1423 SE 10TH ST CAPE CORAL, FL 33990		Mailing Address 3428 SE 5TH AVE. CAPE CORAL, FL 33904	
2. Principal Place of Business 1423 SE 10th St Suite, Apt. #, etc. Unit # 4e		3. Mailing Address 3428 SE 5th Ave. Suite, Apt. #, etc. NA	
City & State CAPE CORAL FL		City & State Cape Coral FL	
Zip 33990		Zip 33904	
Country LEE		Country LEE	
4. FEI Number 65-1038372		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DENILLO, PAUL 3428 SE 6TH AVE. CAPE CORAL, FL 33904		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, type name of registered agent and use if applicable. (NOTE: Registered Agent's signature required when existing)</small>		DATE _____	
FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$350.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENILLO, PAUL 3428 SE 6TH AVE. CAPE CORAL, FL 33904	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 607, 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: * <i>Paul Denillo</i>		Date: 4/8/03 Daytona Phone #: 239-945-0627	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CFR2034 (10/02)