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## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

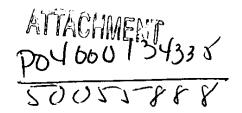
ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Secrétary of State **DOCUMENT # P04000134335** 07-18-2005 90048 013 \*\*\*150.00 1. Entity Name MARTIN AIR CONDITIONING & REFRIGERATION CORP. Principal Place of Business Mailing Address 5701 N HABANA AVENUE 5701 N HABANA AVENUE 50055888 **TAMPA, FL 33614** TAMPA, FL 33614 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 07132005 Chg-P 4. FEI Number Applied For City & State City & State 71-0923505 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTIN, LUIS E Street Address (P.O. Box Number is Not Acceptable) 5701N HABANA AVENUE. TAMPA, FL 33614 Zip Code FL 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 Signature, typed or printed hame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. ☐ Delete TITLE Change ☐ Addition TITLE MARTIN, LUIS E NAME NAME 5701 N HABANA AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA, FL 33614** ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition Delete TITI F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

1/12/05

Daylime Phone #

FILED Jul 18, 2005 8:00 am 1.161



## MARTIN AIR CONDITIONING & REFRIGERATION CORP

5701 N. Habana Avenue Tampa, fl 33614

Dear Sir / Madam:

We did not receive our annual report form. We contacted your office and was advised to send the report by mail we this letter .

Sincerely

Luis E. Martin

President