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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000034717

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90074 015 ***150.00

1, Corporation MARLIN	JAMES AIR CONDITIONING	AND HEATING, INC.				
Principal Place	e of Business	Mailing Address				
202 MORNINGSIDE DRIVE 202 MORNINGSIDE DRIVE VALRICO FL 33594			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed		
			_	04/17/1997		
2. Principal Pl	lace of Business	2a. Mailing Address	11/1	4. FEI Number	Applied For	
21		26 10 130X	119	59-3437380	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Additional Fee Required	
City & State	е	City & State	<u></u>	6. Election Campaign Financing	5.00 May Be	
23		28 Valrico	H	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes the current year Intangit		
24	25	the state of the s	30	Personal Property Tax.		
9. Name and Address of Current Registered Agent 1 81 Name				10. Name and Address of New Registered Age	nt	
CLA	RK, MARLIN S SR		o i Name			
202 MORNINGSIDE DRIVE			dress (P.O. Box Number is Not Acceptable)			
Luci nico es acres			83	8 Morning side DC.		
TAL.	100 12 00001		63			
			84 City	FL 81		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the above-named co	rporation submits this statement for the purpose of char ation's board of directors. I hereby accept the appointme	nging its registered	
office or re agent. I a	egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was au tions of, Section 607.0505, Flori	thorized by the corpora da Statutes.	such a board of directors. Thereby accept the appointme	in as regional co	
SIGNATURE						
SIGNATURE				DATE		
	Signature, typed or printed name of registered agen OFFICERS AN	nt and title if applicable. (NOTE:	Registered Agent signature requ		IRECTORS IN 12	
SIGNATURE 12. TITLE			Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12 Change	
12.	OFFICERS AN	nt and title if applicable. (NOTE:) D DIRECTORS	Registered Agent signature registered Agent signature registered 13.	ADDITIONS/CHANGES TO OFFICERS AND D		
12. TITLE NAME	OFFICERS AN	nt and title if applicable. (NOTE:) D DIRECTORS	Registered Agent signature registered Agent signature registered 13.	ADDITIONS/CHANGES TO OFFICERS AND D		
12. TITLE NAME STREET ADDRESS	OFFICERS AND CLARK, MARLIN S SR	nt and title if applicable. (NOTE:) D DIRECTORS	Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND D LEO/D R 18 Morningside Dr		
12. TITLE NAME	OFFICERS AND DECLARK, MARLIN S SR 202 MORNINGSIDE DRIVE	nt and title if applicable. (NOTE:) D DIRECTORS	Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND D LEO/D R 18 Morningside Dr		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN D CLARK, MARLIN S SR 202 MORNINGSIDE DRIVE VALRICO FL 33594	nt and title if applicable. (NOTE: D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DE JEO/D 18 Morningside Dr Diecretary Treasurer 5/705	Change	
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14. 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 annual report or supplemental annual 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 12 or Block 13 if charged, or or an adaptment with an address, with an other large empowered.

SIGNATURE: