## 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 # P97000041945

**EUBANK AIR CONDITIONING INC.** 

Principal Place	e of Business	Mailing Address			I INCHESI IN ISTIT COUR DUIT BOTH COUR COUR DIGE.	) ((D(G (\$))) Q		
3 POLO CIRCLE BOCA RATON FL 33431		3 POLO CIRCLE BOCA RATON FL 33431			•			
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					DO NOT WRITE IN THIS SP.  3. Date Incorporated or Qualifed	ACE		1
[ 					05/08/1997			
2 Deinging D	long of Pusiness	2a. Mailing Address			4. FEI Number	Apr	olied For	┨
2. Principal Place of Business		26			65-0458585		Applicable	ł ś
Suite, Apt.	# etc	Suite, Apt, #, etc.				\$8.75 A		`
22	<i>"</i> , <i>b</i> .c.	27			5. Certificate of Status Desired	Fee Red		
City & State	е	City & State			6. Election Campaign Financing	\$5.00	May Re	1
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year Intang	ible		1
24	25	29	30				□No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Age	ent		]
				81 Name	-			
EUB	ANK, TIMOTHY D			82 Street Add	dress (P.O. Box Number is Not Acceptable)			ł
3 POLO CIRCLE				Street Aut	Street Address (F.O. Box Number is Not Acceptable)			
BOC	A RATON FL 33431			83	· · · · · · · · · · · · · · · · · · ·		<b>建型</b> 器	1
				84 City	· · · · · · · · · · · · · · · · · · ·	35 Zip C	Add The Co	┨
				64 City	FL  °	ss Zip C	oue	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the a	bove-named cor	rporation submits this statement for the purpose of cha tion's board of directors. I hereby accept the appointment	inging its r	registered	1
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florida. Such change was a tions of. Section 607.0505. Flo	uthorize rida Stat	i by the corporat utes.	tion's board of directors. I hereby accept the appointme	ent as reg	istered	
							•	
SIGNATURE	Signature, typed or printed name of registered agen	nt and title if applicable. (NOTE	: Registered	Agent signature requi	ired when reinstating} DATE			່ ຄ
12.		D DIRECTORS	Registered	Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND D			é
	OFFICERS AN				ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTOR	RS IN 12	(44.00)
12.	OFFICERS AN P EUBANK, TIMOTHY D	D DIRECTORS	13.	TLE	ADDITIONS/CHANGES TO OFFICERS AND D			(44,000)
12.	OFFICERS AN	D DIRECTORS	13. 1.1 TI 1.2 N	TLE	ADDITIONS/CHANGES TO OFFICERS AND D			1004-744/00)
12. TITLE NAME	OFFICERS AN P EUBANK, TIMOTHY D	D DIRECTORS	13. 1.1 TI 1.2 N 1.3 S	TLE AME	ADDITIONS/CHANGES TO OFFICERS AND D	] Change	☐ Addition	DOE004 (44,000)
12. TITLE NAME STREET ADDRESS	P EUBANK, TIMOTHY D 3 POLO CIRCLE	D DIRECTORS	13. 1.1 TI 1.2 N 1.3 S	TLE  AME  TREET ADDRESS  TY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND D			CD0004 (44,000)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EUBANK, TIMOTHY D 3 POLO CIRCLE BOCA RATON FL 33431	D DIRECTORS  DELETE .	13. 1.1 Ti 1.2 Ni 1.3 Si 1.4 Ci	TILE  AME  TREET ADDRESS  TY-ST-ZIP  TLE	ADDITIONS/CHANGES TO OFFICERS AND D	] Change	☐ Addition	CD2E024 (44,00)
12. TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE	P EUBANK, TIMOTHY D 3 POLO CIRCLE BOCA RATON FL 33431 S	D DIRECTORS  DELETE .	13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	TILE  AME  TREET ADDRESS  TY-ST-ZIP  TLE	ADDITIONS/CHANGES TO OFFICERS AND D	] Change	☐ Addition	000000000000000000000000000000000000000
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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 changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90053 027 \*\*\*150.00