

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000124080

1. Entity Name
SOUTHWEST MECHANICAL, INC.



Principal Place of Business
3808 W. GRANADA ST.
TAMPA, FL 33629 US

Mailing Address
3808 W. GRANADA ST.
TAMPA, FL 33629 US



04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3069486	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, RODOLFO JR
3808 W. GRANADA ST.
TAMPA, FL 33629

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVPT HERNANDEZ, RODOLFO JR 3808 W. GRANADA ST. TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC HERNANDEZ, DANIELLE 3808 W. GRANADA ST. TAMPA, FL 33629
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04/29/04-80095-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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: Danielle Hernandez Danielle Hernandez 04-26-04 813-837-4545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #