

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000115671

**Entity Name:** A/C DOCTOR COMPLETE INC.

**Current Principal Place of Business:**

1206 FLOMICH ST.  
DAYTONA BEACH, FL 32117

**Current Mailing Address:**

1206 FLOMICH ST.  
DAYTONA BEACH, FL 32117 US

**FEI Number:** 75-3163388

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARVEY, GLEN V  
14 KINGSGATE CT.  
ORMOND BEACH, FL 32174 US

*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.*

**SIGNATURE:** GLEN HARVEY

04/21/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            HARVEY, GLEN V  
Address        14 KINGSGATE CT.  
City-State-Zip: ORMOND BEACH FL 32174

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** GLEN HARVEY

PRESIDENT

04/21/2023

Electronic Signature of Signing Officer/Director Detail

Date