## 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: ERNESTO DE LA NOVAL

Electronic Signature of Signing Officer/Director Detail

# 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P98000044773

#### Entity Name: CANE AIR CONDITIONING & INSTALLATION, INC.

#### **Current Principal Place of Business:**

9870 SW 45 STREET MIAMI, FL 33165

#### **Current Mailing Address:**

9870 SW 45 STREET MIAMI, FL 33165

#### FEI Number: 65-0836757

# Name and Address of Current Registered Agent:

ERNESTO D, E LA NOVAL 9870 SW 45 ST MIAMI, FL 33165 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:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title	PT	Title	т
Name	DE LA NOVAL, ERNESTO	Name	DE LA NOVAL, ERNESTO
Address	9870 SW 45 STREET	Address	9870 SW 45 ST
City-State-Zip:	MIAMI FL 33165	City-State-Zip:	MIAMI 33165

PRESIDENT

Certificate of Status Desired: No

FILED Apr 05, 2018 Secretary of State CC1527117428

Date

04/05/2018 Date