2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

of the corporation or the receiver or trustee if changed, or on an attackment with

SIGNATURE:

## Feb 03, 2006 08:00 AM **DOCUMENT # 244093 Secretary of State** 1. Entity Name S & W AIR CONDITIONING, INC. Principal Place of Business Mailing Address 2830 NE 11TH AVE POMPANO BCH. FL 33064 POMPANO BCH. FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 59-0997308 Not Applicat Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHEVCHUK, EDWARD S Street Address (P.O. Box Number is Not Acceptable) 2830 NORTHEAST 11TH AVENUE POMPANO BEACH FL 33064 Zip Code 3. 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 according to the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and according to the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when revisialing) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May : After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THILE PD RILE ☐ Delete Change U00000419867 NAME SHEVCHUK, EDWARD N/ME 02/15/06-80022-025-150.00 STREET ADDRESS 2830 NE 11TH AVE STREET AODRESS CISY-ST-ZIP POMPANO BEACH FL CITY-S1-ZIP TITLE STD ☐ Defete TITLE Change ☐ Add NAME SHEVCHUK, CATHY MAMI STREET ADDRESS STREET ADDRESS 2830 NE 11TH AVENUE CRY-ST-ZIP POMPANO BEACH FL 33064 CITY-ST-ZIP ☐ Delete DILE TITLE ☐ Change NAME SHEVCHUK, ADAM NAME STREET ADDRESS 2830 NORTHEAST 11TH AVE STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP POMPANO FL 33064 TITLE Detete TITLE Change ☐ Add MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Chance □ M4. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-70P THE □ Ada ☐ Defete 717/ F ☐ Change NAME NAME STREEL ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 12. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 it made under oath, that I am an officer or direction.

accurate and that my signature shall have the same legat effect as it made under oath, that I am an officer or direct o execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 1

2 Edward S. Sherch K 1/3/66

FILED