

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 400351

(3)

1. Corporation Name

ROSAIR AIR CONDITIONING CORP.



Principal Place of Business

Mailing Address

~~7845 N.W. 57TH STREET
SUITE B
MIAMI FL 33166
US~~

~~7845 N.W. 57TH STREET, SUITE A
PO BOX 661006
MIAMI FL 33166~~

2. Principal Place of Business

2a. Mailing Address

21 7869 N.W. 57th. Street

26 P.O. BOX 661006

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Miami, Florida

28 City & State

Miami, Florida

24 Zip

33166

25 Country

DADE

29 Zip

33266-1006

30 Country

DADE

3. Date Incorporated or Qualified

05/02/1972

3a. Date of Last Report

01/18/1995

4. FEI Number

59-1396191

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~GONZALEZ, CANDY
7845 NW 57TH ST
SUITE B
MIAMI FL 33166~~

81 Name

GONZALEZ, CANDY

82 Street Address (P.O. Box Number is Not Acceptable)

7869 N.W. 57th. Street

83

84 City

Miami,

FL

85 Zip Code

33166

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the city location

NAME Registered Agent signature and the city location

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

NAME

SILVA, HERIBERTO

STREET ADDRESS

12850 SW 61ST ST

CITY- ST- ZIP

MIAMI, FL 0

TITLE

ST

☐ DELETE

NAME

GONZALEZ, CANDY

STREET ADDRESS

10879 NW 7 ST #24

CITY- ST- ZIP

MIAMI FL 0

TITLE

V

☒ DELETE

NAME

RODRIGUEZ, MARINO R

STREET ADDRESS

7845 NW 57TH ST

CITY- ST- ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

1.1 TITLE

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

2.1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

3.1 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

4.1 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

5.1 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

6.1 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Candy Gonzalez. Sec. 04/16/96 (305) 594-2911

Date

Daytime Phone #

CR2E034 (12/95)