

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 429649

FILED
May 01, 2008
Secretary of State

Entity Name: OSCAR AIR CONDITIONING INC

Current Principal Place of Business:

6540 NW 84 AVENUE
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

P O BOX 2405
OCALA, FL 34478 US

New Mailing Address:

FEI Number: 59-1468662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRERAS, RAUL JR
101 S W THIRD STREET
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: VAZQUEZ, OSCAR,
Address: 6540 N.W. 84 AVENUE
City-St-Zip: MIAMI, FL 33166 US

Title: V () Delete
Name: PORTALES, FELIBERTO
Address: 6540 N.W. 84TH AVE.
City-St-Zip: MIAMI, FL 33166

Title: T () Delete
Name: PUIG, ARNALDO
Address: 6540 N.W. 84TH AVE.
City-St-Zip: MIAMI, FL 33166 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: PUIG, DANIEL A
Address: 6540 N.W. 84TH AVE.
City-St-Zip: MIAMI, FL 33166

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: OSCAR VAZQUEZ

DPS

05/01/2008

Electronic Signature of Signing Officer or Director

Date