## 2000 UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE** 

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED DOCUMENT # 443359 Feb 29, 2000 8:00 am 1. Entity Name **Secretary of State** FLORIDA AIR CONDITIONING & REFRIGERATION, INC. 02-29-2000 90121 022 \*\*\*150.00 Principal Place of Business Mailing Address 7950 W. FLAGLER STREET 7230 NW 54TH ST MIAMI FL 33166-4808 **SUITE 107** MIAMI FL 33144-2206 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1537887 Not Applicable \$8.75 Additional Country\*-- -Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MODRONO, HUMBERTO Street Address (P.O. Box Number is Not Acceptable) 7230 NW 54TH ST MIAMI FL 33166-4808 Zip Code 8. 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 DATE (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE & \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition PD ☐ Delete TITLE TITLE MODRONO, HUMBERTO NAME NAME STREET ADDRESS STREET ADDRESS 4555 E 9TH COURT CITY-ST-ZIP City-St-ZiP HIALEAH FL 33013 ☐ Change ☐ Addition Delete TITLE TITLE NAME MODRONO, NIBYA NAME STREET ADDRESS STREET ADDRESS 4555 E 9TH COURT CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33013 ☐ Addition ☐ Change ☐ Delete TITL F MODRONO, ARCADIO NAME STREET ADDRESS 4580 E. 9TH COURT STREET ADDRESS CITY-ST-ZIP HIALEAH FL CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE GONZALEZ, GREGORIO NAME NAME STREET ADDRESS STREET ADDRESS 4555 E. 9TH COURT CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33013 ☐ Change ☐ Addition TITLE ☐ Del€te NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my significant small have the same legal effect as if made under eath; 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 11 or Block 12 if changed, or on an attachment with an address, with an pure of the corporation of the corp