DOCUMENT # 485644 (9)         ALAN AIR CONDITIONING, INC.         Principal Place of Business         Maring Address         Apris & Maxon Are Market Report         Suble Apt # (abc) Are Market Report         Suble Apt #, etc         Apt #         Apt # <th>Secretary of Sta</th> <th>am Jan 16 1997 8</th> <th>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Division OF CORPORATIONS</th> <th></th> <th>PROFIT RPORATION JAL REPORT <b>1997</b></th> <th>COF</th>	Secretary of Sta	am Jan 16 1997 8	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Division OF CORPORATIONS		PROFIT RPORATION JAL REPORT <b>1997</b>	COF
Principal Place of Business     Idea ing Address       1 (ord's \$ 14/6400 AVE INAME FLODA 33186     1/ord's \$ 14/6400 AVE INAME FLODA 33186       2. Principal Place of Business     2a. Mailing Address       2. Principal Place of Business     2a. Mailing Address       2. Principal Place of Business     2a. Mailing Address       3. Date Incorporated of Ouslified OglOd/1975     3a. Date of List Rep OglOd/1975       3. Date Incorporated of Ouslified OglOd/1975     3a. Date of Could of Ouslified OglOd/1975       3. Date Incorporated of Ouslified OglOd/1975     3a. Date of Could of Ouslified OglOd/1975       3. Date Incorporated of Ouslified OglOd/1975     3a. Date of Could of Ouslified OglOd/1975       3. Date Incorporated of Ouslified OglOd/1975     3a. Date of Could of Ouslified OglOd/1975       3. Date Incorporated Name and Address of Current Replatered Agent     6. Certification Status Desired Poind Status of New Replatered Agent       9. Name and Address of Current Replatered Agent     10. Name and Address of New Replatered Agent       10. Name and Address of Current Replatered Agent     10. Name and Address of New Replatered Agent       11. Pursuant to the provestors of Sections 697 0002 and 607 1508; Forda Statutes, the above named corporation submits this statement of the appointment as regent 1 am Induced Interdependence of Hondrag Statutes       13. Pursuant to the provestors of Sections 697 0002 and 607 1508; Forda Statutes, Hondrogen Statutes       14. P. December with address of Pointrus, Such change was submored by the corporation submits this sta			(9)	•		
Op/04/1975         O3/05/1996           2. Principal Place of Business         2a. Mailing Address         4. FEI Number         Appl           3. Serie, Apt #, etc.         2a         Suite, Apt #, etc.         5. Certificate of Status Desired         \$8.75 Ad Fee Req.           2. Dr. Apt #, etc.         27         Clip & State         6. Certificate of Status Desired         \$8.75 Ad Fee Req.           2. Dr. Country         28         Zip         Country         8. Election Campaign Financing Trust Fund Contribution         Address           2. Dr. Zob         29         30         Per Intercent Mediates of Current Registered Agent         10. Name and Address of New Registered Agent           DEEMS, ALAN 12225 SW 109 CT. MAAMI, FL, FLORIDA 33176         81         Name         10. Name and Address (P.O. Box Number is Not Acceptable)           82         Street Address (P.O. Box Number is Not Acceptable)         82         Street Address (P.O. Box Number is Not Acceptable)           83         Clip 4         Clip 4         Clip 4         Clip 4         Clip 4           84         Name         Clip 4         Clip 4         Clip 4         Clip 4           10. Name and Address of Our Mode, Forida Statutes, the address of One of forida Statutes and the addres of forida Statutes and t			174 S W 142ND AVE	14074 S W 14	12ND AVE	4074 S W 14
26       59-1618584       Nor /         Suite. Apt. #, etc.       Suite. Apt. #, etc.       5. Certificate of Status pesired       Fee Req.         City & State       City & State       6. Election Campaign Financing       \$5.00 m.         Zip       Country       Zip       Country       8. The financing       \$5.00 m.         Zip       Country       Zip       Country       8. This corporation has liability for intemptible tax unders. Information       Acaded to interption intemptible tax unders. Information       Acaded to interption intemptible tax unders. Information       Interption intemptible tax unders. Information       Fee Req.         20       20       30       10. Name and Address of New Registered Agent       Non /       Non /<	4/1975 03/05/1996	09/04/1975 03/05/1	Mailing Address	2a. Mailing Ad	Place of Business	Principal F
27     27     City & State     Fee Req.       City & State     City & State     City & State     Election Campaign Financing     \$5.00 m.       Zip     Country     Zip     Country     Election Campaign Financing     \$5.00 m.       Zip     Country     Zip     Country     Election Campaign Financing     \$5.00 m.       28     29     30     This corporation has liability for intangible tax under s. The fond Statutes     Yes     No       9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     Yes     No       12225 SW 109 CT.     MiAMI, FL., FLORIDA 33176     State of fonda Statutes, the above-named corporation submits this statement for the purpose of changing its r of offee or registered agent or both, and the state of fonda. State of fon	\$ <u>9</u> .75	Č	Suite, Apt. #, etc.	۲٬۰۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰۰٬۰	#, etc.	
Zip     Country     Zip     Country     Zip     Country     B     This End Contribution     Added to       Zip     Zip     Zip     Country     B     This Composition has liability for intangible tax unders. It Florida Statutes     Yes     No       9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       12225 SW 109 CT.     MIAMI, FL, FLORIDA 33176     B1     Name     Registered Agent       84     City     FL     85     Zip Country       83     Street Address (P.O. Box Number is Not Acceptable)     Registered Agent     82       84     City     FL     85     Zip Country       85     State of Florida Statutes     the applicative corporation's board of directors. I hereby accept the applicative of the applicative interflorida statutes     Interflorida statutes     DATE       84     City     The     Interflorida statutes     Interflorida statutes     Interflorida statutes       85     Street Address (P.O. Box Number is Not Acceptable)     Interflorida statutes     Interflorida statutes     Interflorida statutes       82     Street Address (P.O. Box Number is board of directors. I hereby accept the applicative registered Agent statement for the applicative registered Agent statement for the	Fee Requir			27		]
25       29       30       Find a Statutes       Provide St		Trust Fund Contribution	·	28		]
9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         DEEMS, ALAN 12225 SW 109 CT. MIAMI, FL, FLORIDA 33176       81       Name         82       Street Address (P.O. Box Number is Not Acceptable)       83         84       City       FL       85         85       City       FL       85       20 pco         1. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purposes of changing its r       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 re agent. I am familiar with and accept the obligations of. Section 607.0505, Florida Statutes.         IGUNTURE       Ignitizet typed to protein agent and took age function for 0.5005, Florida Statutes.       13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. Florida Statutes.         Ite       PD       DEEMS, ALAN       I as TREET ADDRESS         Ity-s1: 2P       I as TREET ADDRESS       I as TREET ADDRESS         Ity-s1: 2P       I as TREET ADDRESS       I as TREET ADDRESS         Ity-s1: 2P       I as TREET ADDRESS       I as TREET ADDRESS         Ity-s1: 2P       I as TREET ADDRESS       I as TREET ADDRESS         Ity-s1: 2P       I as TREET ADDRESS       I as TREET ADDRESS				· •	— I	n '
12225 SW 109 CT.       82       Street Address (P.O. Box Number is Not Acceptable)         83       84       City       FL       85       Zip Co.         85       City       FL       85       Zip Co.         86       City       FL       85       Zip Co.         87       City       FL       85       Zip Co.         88       City       FL       85       Zip Co.         89       City       FL       85       Zip Co.       Site City       Site Ci	and Address of New Registered Agent	E E		Address of Current Registered Agent		05
MIAMI, FL., FLORIDA 33176	Number is Not Acceptable)				25 ŚW 109 CT.	122
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 r agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.  GNATURE  GINATURE  GIN		83	83	DA 33176	MI, FL., FLORIDA 33	MV
Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its r agent. Lam familiar with and accept the obligations of. Section 607.0505, Florida Statutes.  GNATURE  Signature, typed for redistrand agent and loc it applicable  (NOTE: Registered Agent signature required when reliating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  (NOTE: Registered Agent signature required when reliating)  DATE  OFFICERS AND DIRECTORS  I. TITLE  OFFICERS AND DIRECTORS  I. TITLE  DEEMS, ALAN  REL ADDRESS  Y-S1-2P  MIAMI FL  DELETE  DELE	as Zin Codi	84 City	84 City			
GNATURE         Signature, typed to prefed ment of registered agent and its if applicable       INOTE, Registered Agent signature reguled when reinstaring)       DATE         PD       DELETE       1.1 Title       Change         MME       DEEEMS, ALAN       1.2 NAME       1.3 Striffer ADDRESS         12225 SW 109 CT.       1.3 Striffer ADDRESS       1.3 Striffer ADDRESS         TY-S1-ZIP       MIAMI FL       1.4 CitY-S1-ZIP         ILE       D       DELETE       2.1 Title         MARE       DEEMS, KAROL       2.2 NAME         12225 SW 109 CT.       1.3 Striffer ADDRESS       1.2 Change         MAME       DEEMS, KAROL       1.2 NAME         12225 SW 109 CT.       1.3 Striffer ADDRESS       1.2 Change         MARE       DEEMS, KAROL       2.1 Title         12225 SW 109 CT.       2.3 Striffer ADDRESS       1.2 Change         ITY-S1-ZIP       DELETE       2.1 Title       Change         MARE       DELETE       3.1 Striffer ADDRESS       Change         ITY-S1-ZIP       DELETE       3.1 Title       Change         ME       DELETE       3.1 Title       Change         ME       2.2 NAME       3.3 STREET ADDRESS       1.2 Change <th></th> <th></th> <th>7.1508. Florida Statutes, the above-name</th> <th>of Sections 607.0502 and 607.1508. Flo</th> <th>to the provisions of Sec</th> <th>. Pursuant</th>			7.1508. Florida Statutes, the above-name	of Sections 607.0502 and 607.1508. Flo	to the provisions of Sec	. Pursuant
Signature Typed or protect agent and too if age (cable     INCITE. Registered Agent signature required when reinstarng)     DATE       2.     OFF ICERS AND DIRE CTORS     13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       1LE     PD     DELETE     1.1 TITLE       AME     DEEMS, ALAN     1.2 NAME       17Y-ST-ZIP     MIAMI FL     1.3 STREFT ADDRESS       17Y-ST-ZIP     DELETE     1.4 CITY-ST-ZIP       1LE     DEEMS, KAROL     2.2 NAME       12225 SW 109 CT.     1.3 STREFT ADDRESS       12225 SW 109 CT.     1.4 CITY-ST-ZIP       ITLE     DELETE       2 NAME     2.2 NAME       12225 SW 109 CT.     2.3 STREET ADDRESS       17Y-ST-ZIP     MIAMI FL       10 DELETE     3.1 TITLE       184 E     3.2 NAME       196 EFE ADDRESS     3.3 STREET ADDRESS       17Y-ST-ZIP     3.4 CITY-ST-ZIP       11E     DELETE       118     3.3 STREET ADDRESS       119     1.4 CITY-ST-ZIP	r directors. I hereby accept the appointment as regi	I by the corporation's board of directors. I hereby accept the appointin utes.	<ol> <li>Such change was authorized by the c Section 607.0505, Florida Statutes.</li> </ol>	or both, in the State of Florida. Such chand accept the obligations of, Section 60	registered agent, or both am familiar with land acc	office or agent. La
PD       DELETE       1.1 TITLE       Change         MME       DEEMS, ALAN       1.2 NAME       1.2 NAME         12225 SW 109 CT.       1.3 STREFT ADDRESS       1.3 STREFT ADDRESS         TY-S1-ZIP       MIAMI FL       1.4 CITY-ST-ZIP         Ittle       D       DELETE       2.1 TITLE         MAE       DEEMS, KAROL       2.2 NAME         Ittle       DEEMS, KAROL       2.2 NAME         12225 SW 109 CT.       2.3 STREET ADDRESS         ITY-ST-ZIP       DELETE       2.1 TITLE         Ittle       DEEMS, KAROL       2.2 NAME         12225 SW 109 CT.       2.3 STREET ADDRESS       Change         ITY-ST-ZIP       DELETE       2.1 TITLE         Ittle       DELETE       3.3 STREET ADDRESS         ITY-ST-ZIP       DELETE       3.1 TITLE         Ittle       DELETE       3.1 TITLE         Ittle       3.2 NAME       3.2 NAME         Ittle       3.3 STREET ADDRESS       3.3 STREET ADDRESS         Ity-ST-ZIP       3.4 CITY-ST-ZIP         Ittle       DELETE       3.4 CITY-ST-ZIP         Ittle       DELETE       4.1 TITLE	۵) DATE	d Agent signsture required when reinstating) DATE	applicable INOTE: Registered Agent signal	ted name of registered agent and tics it applicable	Signature, typed or printed nam	GNATURE
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