

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **544632** (3)

1. Corporation Name

CLIMATE SERVICE, INC.

Principal Place of Business

**4754 NE 12TH AVE.
FT. LAUDERDALE FL 33334**

Mailing Address

**4754 NE 12TH AVE.
FT. LAUDERDALE FL 33334**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**ANTONOGLOU, JAMES
2 PINE RIDGE DR
RIVERA BCH FL 33404**

3. Date Incorporated or Qualified

09/07/1977

3a. Date of Last Report

08/15/1995

4. FEI Number

65-0272097

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

10. Name and Address of New Registered Agent

81

Name

SILVERMAN, MARK DAVID

82

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

7630 WESTWOOD DRIVE #328

83

84

City

FT. LAUDERDALE

FL

85 Zip Code

33321

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

Mark D. Silverman
Signature, typed or printed name of registered agent and state of residence

Mark D. Silverman
Signature, typed or printed name of registered agent and state of residence

5-1-96
DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

**MARTINEZ, RAMON
3639 CARAMBOLA CIR N
COCONUT CREEK FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

VP

NAME

**SCHUMAKER, STAN
415 NE 23RD ST.
WILTON MANORS FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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SIGNATURE:

Stan Schumaker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stan Schumaker

5/1/96

954 771-7337
Daytime Phone #

CR2E034 (12/95)