May 05, 1999 8:00 am Secretary of State

05-05-1999 90083 001 \*\*\*150.00

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Mailing Address

3878 PROSPECT AVENUE

RIVIERA BEACH FL 33404

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 691343

1. Corporation Name

Principal Place of Business

3878 PROSPECT AVENUE

RIVIERA BEACH FL 33404

BUILDERS AIR CONDITIONING II, INC.

officer or director of the corporation or the receiver or the Block 12 or Block 13 if changed, or on an attachment

SIGNATURE:<

| US   | •   | US          |                      |          |           |              |                   | 3. Date Incorporated or Qualified 06/22/1981   |                        |   |                |  |
|--|---|-------------|----------------------|----------|-----------|--------------|-------------------|--|------------------------|---|----------------|--|
| 2 Principal F  | Place of Business   | 2a N        | Mailing Address      |          |           |              |                   | 4. FEI Number  |                        | A   | pplied For     |  |
| 21   |   | 26          | g                    |          |           |              |                   | 59-2212373   |                        |   | lot Applicable |  |
| Suite, Apt   | . #, etc.   |             | Suite, Apt. #, etc.  |          |           |              |                   | 5. Certificate of Status Desired   |                        |   |                |  |
| City & State   |   |             | City & State         |          |           |              |                   | 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees  |                        |   |                |  |
| Zip  | Country   | 28          | ip                   | - G      | ountry    |              |                   |  | st year Int            |   | 10 1 663       |  |
| <u> </u>   | 25 29 30  |             |                      |          |           |              |                   | 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No   |                        |   |                |  |
| 24 25 29 30<br>9. Name and Address of Current Registered Agent |   |             |                      |          |           |              |                   | 10. Name and Address of New Registered Agent   |                        |   |                |  |
|  | 5. Name and Address of Calver   | g.oto       |                      |          | 81        | Name         |                   |  | <u> </u>               |   |                |  |
| HAROD MARTING  |   |             |                      |          |           |              |                   |  |                        |   |                |  |
| 3878 PROSPECT AVE. #3  |   |             |                      |          | 82        | Street       | Addres            | ss (P.O. Box Number is Not Acceptab  | le)                    |   |                |  |
| RIVIERA BEACH FL 33404   |   |             |                      |          | 83        | -            |                   |  |                        |   |                |  |
|  |   |             |                      |          |           |              |                   |  |                        |   |                |  |
|  | * ·   |             |                      |          | 84        | City         |                   |  | FL                     | 85 Zip  | Code           |  |
|  |   |             |                      |          | ل_        |              |                   | the state of the s | . –                    | •     <u>                                </u> | a rapiatarad   |  |
| office or  | t to the provisions of Sections 607.050 registered agent, or both, in the State | of Florida. | Such change was a    | uthoriz  | ed by     | the cort     | corpor<br>oration | ration submits this statement for the pi<br>i's board of directors. I hereby accept  | urpose or<br>the appoi | ntment as r                                   | egistered      |  |
| agent. I a   | am familiar with, and accept the obliga   | tions of, S | ection 607.0505, Flo | orida St | atutés    |              |                   | • ,  |                        |   |                |  |
| SIGNATURE  |   |             |                      | _        |           |              |                   |  |                        | ·   |                |  |
|  | Signature, typed or printed name of registered age                              |             | <del></del>          |          |           | nt signature | required v        | when reinstating)  | DATE                   |   |                |  |
| 12.  | OFFICERS AN   | ID DIREC    |                      | 1        |           |              | 1                 | ADDITIONS/CHANGES TO OFFI  | CERS AN                | ID DIRECT                                     |                |  |
| TITLE  | PVS   |             | ☐ DELETE             |          | TITLE     |              |                   |  |                        | change  | ∐ Addition     |  |
| NAME   | MARTING, HAROLD   |             |                      | 1.2      | NAME      |              | 1                 |  |                        |   |                |  |
| STREET ADDRESS   |   |             |                      | 1.3      | STREET    | TADDRESS     | :                 |  |                        |   |                |  |
| CITY ST ZIP  | RIVIERA BEACH FL  |             |                      | 1.4      | CITY-S    | T-ZIP_       |                   |  |                        |   |                |  |
| TITLE  | TD  |             | ☐ DELETE             | 2.1      | TITLE     |              |                   | ·  |                        | Change  | ☐ Addition     |  |
| NAME   | MARTING, HAROLD   |             |                      | 2.2      | NAME      |              | }                 |  |                        |   | 1              |  |
| STREET ADDRESS   | 3878 PROSPECT AVE #3  |             |                      | 2.3      | STREET    | TADDRESS     |                   | <del></del>  |                        |   |                |  |
| CITY-ST-ZIP  | RIVIERA BEACH FL  |             |                      | 2.       | 4 CITY-S  | T-ZIP        |                   |  |                        |   |                |  |
| TITLE  |   |             | ☐ DELETE             | 3.1      | TITLE     |              |                   |  |                        | Change  | Addition       |  |
| NAME   |   |             |                      | 3.2      | NAME      |              | Ì                 |  |                        |   |                |  |
| STREET ADDRESS   | s   |             |                      | 3.3      | STREET    | TADDRESS     | ;                 |  |                        |   |                |  |
| CITY-ST-ZIP  |   |             |                      | 3.4      | I. CITY-S | T-ZIP        |                   |  |                        |   |                |  |
| TITLE  |   |             | ☐ DELETE             |          | TITLE     |              |                   |  |                        | Change  | Addition       |  |
| NAME   |   |             |                      | 4.       | 2 NAME    |              |                   |  |                        |   |                |  |
| STREET ADDRESS   | s   |             |                      |          |           | TADDRESS     |                   |  |                        |   |                |  |
|  | 7   |             |                      | 4        | CITY-S    |              |                   |  |                        |   |                |  |
| CITY-ST-ZIP  | <del> </del>  |             | ☐ DELETE             | _        | TITLE     |              |                   |  |                        | ☐ Change                                      | ☐ Addition     |  |
| NAME   |   |             |                      |          | NAME      |              |                   |  |                        | _ •   |                |  |
|  | ,   |             |                      |          |           | TADDRESS     |                   |  |                        |   |                |  |
| STREET ADDRESS   | <b>`</b>  |             |                      |          | CITY-S    |              | [                 |  |                        |   |                |  |
| CITY-ST-ZIP  |   |             | DELETE               |          | TITLE     | ,-ZIF        | +                 |  |                        | ☐ Change                                      | ☐ Addition     |  |
| TITLE  |   |             |                      |          | NAME      |              |                   |  |                        |   |                |  |
| NAME   |   |             |                      |          |           |              |                   |  |                        |   |                |  |
| STREET ADDRESS   | s   |             |                      |          |           | TADDRESS     | 1                 |  |                        |   |                |  |
| CITY-ST-ZIP  | 1   |             |                      | 6.4      | CITY-S    | T- ZIP       | }                 |  |                        |   |                |  |

14. 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 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 trouble employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in