2003 FOR PROFIT CORPORATION

FILED Mar 13, 2003 8:00 am § Secretary of State **UNIFORM BUSINESS REPORT (UBR** F51459 DOCUMENT # 1. Entity Name 03-13-2003 90101 022 ***150.00 ALADDIN WARD ELECTRIC & AIR, INC. Principal Place of Business Mailing Address 7011 15TH ST E 7011 15TH ST E SARASOTA FL 34243 SARASOTA FL 34243 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite: Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-2137098 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENNETT, MICHAEL S Street Address (P.O. Box Number is Not Acceptable) 7304 BROUGHTON ST. SARASOTA FL 34243 530 HABITAT 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. I am familiar with, and accept the obligations of registered agent. Signature 🚄 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Change Addition BENNETT, MICHAELS. BENNETT, MICAHEL S NAME NAME 7056 HAWKS HARBOR CIRCLE 7304 BROUGHTON ST. STREET ADDRESS STREET ADDRESS BRADENTOW, FL CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP 34207 TITLE ☐ Delete TITLE Change Change Addition BROWN, STEVENC. 13634 7 Ave. Cir. NE NAME BROWN, STEVEN C. NAME STREET ADDRESS STREET ADDRESS 5212 1 AVE DR NW CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP BEADENTON, FL 34212 TITLE ☐ Delete TITLE Change Addition NAME HICKS, DAVID NAME HICKS , DAVID H. STREET ADDRESS 7011 -301 BLVD STREET ADDRESS 530 HABITAT BLVD. CITY-ST-ZIP CITY-ST-ZIP OSPREY, PL 34229 SARASOTA FL 34243 Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. ☐ Delete TITLE Change Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

(941) 756-5547

Change

☐ Addition

CR2E034 (10/02)