FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G36975

(2)

SOUTH FLORIDA AIR CONDITIONING & REFRIGERATION S UPPLY, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business 4010 NE 5TH TERR. OAKLAND PARK FL 33334		Mailing Address						
		4010 NE 5TH TERR.						
CARLAND PA	JRK FL 33334	OAKLAND PARK FL 33	3334		DO NOT WRITE	IN THIS S	PACE	
					3. Date Incorporated or Qualified		TAGE	
					05/04/1983			
2. Principal P	face of Business	2a, Mailing Address			4. FEI Number		$\neg \tau \neg$	Applied For
21		26			59-2333599		⊢	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$9.75 Addition				
22		27		5. Certificate of Status Desired	Ц		Required	
City & State		City & State		8. Election Campaign Financing		\$5.00 May Be		
23		28			Trust Fund Contribution	<u> </u>	Adde	d to Fees
Zip	Country	Ζφ	Countr	У	8. This corporation owes or has paid	-		1
24	25 p. Name and Address of Curre	29	30		Personal Property Tax due June :] Yes	∐ No
		ent Registered Agent		Name	10. Name and Address of New Reg	istered A	gent	
	RNER, EDWARD		"	Ivanie				
4010 NE 5TH TERRACE				Street Add	dress (P.O. Box Number is Not Acceptable)			
FI.	LAUDERDALE FL 33334		83	 				
			6	"	•			
			64	City			85 Zi	p Code
44 Purament	to the provisions of Castions CO7 OF	00 and 007 1500 Florida Out		1		<u>FL</u>	ļļ	
office or re	egistered agent, or both, in the Stat	le of Florida, Such change wa	s authorized b	ye-named cor by the corpora	poration submits this statement for the pu ation's board of directors. I hereby accept	urpose or I the appo	cnanging sintment a	its registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Statute	BS.	,			Ŭ
SIGNATURE	Signature, typed or printed name of registered a							
12.		ND DIRECTORS	13.	ent signature requ	ired when reinslating)	DATE	DIDECT	200 111 40
TITLE	PD	DELETE	1.1 TITLE	Τ	ADDITIONS/CHANGES TO OFFICE	ERS AND	Change	
NAME	TURNER, EDWARD		1.2 NAME			,	Change	
STREET ADDRESS	4010 NE 5TH TERR			T ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY -					
TITLE		☐ DELETE	2.1 TITLE	<u> </u>			Change	3 Addition
NAME			2.2 NAME			·		
STREET ADDRESS			2.3 STREE	T ADDRESS		•		
CITY-ST-ZIP			2.4 CITY-	ST-ZIP				
TITLE		DELETE	3.1 TITLE				Change	Addition
NAME			32 NAME					- '
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAME				-	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				İ
TITLE		☐ DELETE	5.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			5.2 NAME			-	· ·	
STREET ADDRESS				T ADDRESS				İ
CITY-ST-ZIP			5.4 CITY-					
TITLE		☐ DELETE	61 TITLE	 	10 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Change	Addition
NAME			62 NAME			•		
STREET ADDRESS				T ADDRESS				
CITY - ST - ZIP	\sim		A A City -	915-12				
14. I hereby o	ertify that the information submied y	with this filing does not qualify	for the exemi	otion stated in	Section 119 07(3)(i) Florida Statutes I fr	idher cer	ify that th	e information

all report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in twith an address.