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 # 1. Corporation Name

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(1)

AIR ENERGY HEAT PUMPS, INC.

| Principal Place of Business Mailing Address | | | | | | | | | | - I PADADII BRAF DRIII DERTO RAIRI RORD | A ANDE BADA A | HOTA DIEN DIDI | |
|--|--|---|--------------------|-------------|-----------------------|----------------|--------------------------------|---|----------------------------------|---|---------------|----------------|----------------|
| 1300 S. ANDREWS AVE. | | | | | 1300 S. ANDREWS AVE. | | | | | | | | |
| 1300 S ANDREWS AVE | | | | | 1300 S ANDREWS AVE | | | | | | | | |
| POMPANO BOH FL 33069 | | | | | POMPANO BCH FL 33069 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | | | | | 3. Date Incorporated or Qualified 04/05/1985 | | | |
| 2. Principal Place of Business | | | | 2a. | 2a. Mailing Address | | | | | 4. FEI Number | | A | Applied For |
| 21 | <u> </u> | | | 26 | 26 | | | | | 59-2533506 | | N | Not Applicable |
| - | Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 | Additional | |
| 22 | 12 | | | | 7 | | | | g. Certificate of Status Desired | | Fee F | Required | |
| City & State | | | | | City & State | | | | | 6. Election Campaign Financing | _ | | May Be |
| 23 | | | | 28 | | | | | | Trust Fund Contribution | _ 니 | | to Fees |
| _ | Zip | Country | | | , · | | | | | 8. This corporation owes or has paid the curvent year | | | |
| 24 | | 25 29 9, Name and Address of Current Registered Agen | | tered Agent | 30 | | | Personal Property Tax due June 10. Name and Address of New Re | | | No | | |
| | | | | on negro | orou ngom | | 81 | Nam | e | (B) Hamb and Address of Herr III | -Bintoi en | Agon. | |
| ZAKRYK, JOHN | | | | | | | 82 | | | | | | |
| 1300 \$ ANDREWS AVE POMPANO BCH FL 33069 | | | | | | | | Stree | et Addre | ess (P.O. Box Number is Not Accepta | ble) | | |
| FUMPANO BUTI PL 33009 | | | | | | | 83 | | | | | | |
| | | | | | | | \square | | | | | | |
| | | | | | | | 84 | City | | | FL | 85 Zip | Code |
| 11. | 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at | | | | | | | | | pration submits this statement for the | | of changing | its registered |
| 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 office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reagent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | | | | s registered | |
| eid | - | | , ала сосор, по от | gaalora, Çr | , 555, 67, 65, 655, 7 | | | | | | | | |
| SIGNATURE Signature, typed or printed name of negotiered agent and title if applicable (NOTE Registere | | | | | | | red Age | nt signat | ure require | d when reinstating) | DATE | | |
| 12. | | | OFFICERS A | ND DIREC | | 13 | | | | ADDITIONS/CHANGES TO OFFI | CERS AN | | |
| TITL | | PD | | | — | | 1.1 TITLE | | | , | | ☐ Change | ☐ Addition |
| NAN | | | | | | 1.2 NAME | | | | | | | |
| | 1300 S ANDREWS AVE | | | | | | | ADDRES: | š | | | | |
| | (+ST-ZIP | | PANO BCH FL | | Doute | | CITY-S | T-ZIP | | | | Channe | - Addition |
| TITL | - 1 | VD VODE | 0 101111 | | ☐ DELETE | | TITLE | | | | | Change | Addition |
| NAM | · · | 4444 0 4110 0000 | | | | | 2.2 NAME 2.3 STREET ADDRESS | | | | | | |
| | 801/04/10 00/1/5/ | | | | | | | | 3 | | | | |
| TITL | r-ST-ZIP | PUMP | WIND BON FL | | DELETE | | CITY-S | 51 - ZIP | - | | | Change | Addition |
| NAN | | | | | | | NAME | | | | | ondingo | riodition |
| | EET ADDRESS | | | | | 3.3 STREET | | ADDRESS | | | | | |
| | -ST-ZIP | | | | | | CITY-S | | ' | | | | |
| TITL | | | | | DELETE | | TITLE | PI - LH | 1 | | | Change | ☐ Addition |
| NAN | ŀ | | | | _ | 4. 2 | NAME | | | | | ` | _ i |
| | STREET ADDRESS | | | | | 4 3 STHEET ADD | | ADDRESS | ; | | | | |
| CITY | -ST-ZIP | | | | | 4.4 | CITY-S | r-ZIP | | | | | |
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| STR | EET ADDRESS | | | | | 5.3 | STREET | address | ; | | | | |
| CITY | -ST-ZIP | | | | | 5.4 | DITY-S | T - ZIP | | _ | • | | ļ |
| TITL | | | | | DELETE | | TITLE | | | | | Change | Addition |
| NAM | ie | | | | | 6.2 | NAME | | | | | | İ |
| STREET ADDRESS | | | | | | 6.3 STREET | | | 5 | | | | |
| 0.00 | | | | | | | DITY O | T 740 | 1 | | | | |

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

FILED

Apr 22 1998 8:00am

Secretary of State