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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J45198

AIR RITE AIR CONDITIONING, INC.

5198

(5)

## FILED Mar 31 1997 8:00am Secretary of State



Principal Place of Business Mailing Address										
•	•									
1356 NW BOCA RATON BLVD 20784 SONTETO DR BAY C-11 BOCA RATON FL 33433-272:										
BOCA RATON FL 33432	!	US	•					,		
US						12/04/1986 03/27/			of Last Report /1996	
2. Principal Place of E	26. Mailing Address	i -			4. FEI Number			olied For		
1120784 So	neto Drive	26				59-2748884			Applicabl	
<del></del>	Suite, Apt. #, etc.	uite, Apt. #, etc.						.75 Additional see Required		
2						6. Election Campaign Financing			\$5.00 May Be	
Boca Ra	tho FL	28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Col	untry		8. This corporation has liability for		der s.	199.032,	
33733	25 Palm Beach	29	30	,			Yes No			
	me and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered Agent			
HARRIS, RICHARD J.					ryanie					
20784 SONETO DRIVE				82	Street Add	Address (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33433				83			***************************************			
				84	City		lee I	Zip C	oda	
				54	City		FL 85	z.ip C	008	
SiGNATURE Signature 12.	முக்க or punited name of registered ag OFFICERS AN	ID DIRECTORS	E Regislere 13.	d Age	ni signalure requ	ired when reinstaling)  ADDITIONS/CHANGES TO OFFIC	DAYE ERS AND DIREC	CTORS	IN 12	
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	RIS, RICHARD J.		12 N	AME						
	SONETO DR.	_	138	TAEET	ADDRESS					
	RATON FL 3343		_	ITY - S	T-ZIP		☐ Ch		Additio	
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14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED HOME OF SIGNAING OFFICER OR DIRECTOR

3-20-97

.561-338-5288 Davime Phone

Phone #