

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

**FILED**  
**Feb 22, 1999 8:00 am**  
**Secretary of State**

02-22-1999 90104 017 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **J68065**

1. Corporation Name  
**DEN-AIR AIR CONDITIONING, INC.**



Principal Place of Business: SOUTH H STREET, LAKE WORTH FL 33460-4430  
 Mailing Address: 119 SOUTH H STREET, LAKE WORTH FL 33460-4430, US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 102 So. 7. Street, Lake Worth Fl.  
 2a. Mailing Address: P.O. Box 1071, Lake Worth Fl.  
 City & State: Lake Worth Fl.  
 Zip: 33460

3. Date Incorporated or Qualified: 04/15/1987  
 4. FEI Number: 59-2800372  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

9. Name and Address of Current Registered Agent  
**MENARD, A. DENIS**  
 3189 NAUTICAL WAY  
 LANTANA FL 33462

10. Name and Address of New Registered Agent  
 81 Name: **MENARD A. DENIS**  
 82 Street Address (P.O. Box Number is Not Acceptable): **3839 HENYON RD.**  
 83 **3839 HENYON RD.**  
 84 City: **Lake Worth** FL 85 Zip Code: **33460**

i. 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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE	PVT MENARD, A. DENIS 3189 NAUTICAL WAY LANTANA FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	PVT MENARD A. DENIS 3839 HENYON RD LAKE WORTH FL.
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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, with all other like empowered.

SIGNATURE: *[Signature]* 1-6-99  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)