

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91429 035 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # J86370			90111916																																			
1. Entity Name CENTRAL AUTO AIR, INC.																																						
Principal Place of Business 1623 NE 168TH STREET NORTH MIAMI BEACH, FL 33162 US		Mailing Address 1623 NE 168TH STREET NORTH MIAMI BEACH, FL 33162 US																																				
2. Principal Place of Business 6110 SW 55 CT Suite, Apt. #, etc.		3. Mailing Address 6110 SW 55 CT Suite, Apt. #, etc.																																				
City & State DAVIE, FL		City & State DAVIE, FL																																				
Zip 33314		Zip 33314																																				
Country BROWARD		Country BROWARD																																				
4. FEI Number 65-0003389		Applied For Not Applicable																																				
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		☒ CHECK HERE IF MAKING CHANGES																																				
6. Name and Address of Current Registered Agent NODARSE, PASTOR 1623 NE 168TH STREET NORTH MIAMI BEACH, FL 33162		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6110 SW 55 CT City DAVIE FL Zip Code 33314																																				
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signed reports when necessary) DATE _____																																						
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																						
10. OFFICERS AND DIRECTORS																																						
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(X), 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 207, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with or without a line empowered.																																						
SIGNATURE: Pastor Nodarse, Jr.		3/27/03 (954) 524-1846																																				