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

FILED Sep 17 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # K11143 COMPLETE AIR CONDITIONING SERVICE, INC. Principal Place of Business Mailing Address 228 HIBISCUS ST 228 HIBISCUS ST RAY 1 RAY 1 DO NOT WRITE IN THIS SPACE JUPITER FL 33458 JUPITER FL 33458 3. Date Incorporated or Qualified 01/07/1988 2. Principal Place of Business 2a, Mailing Address 4. FEt Number Applied For 26 **65-0019715** Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Namo CARR, JAMES B. 15717 113TH TRAIL N. 82 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33478 83 84 City Zip Code 85 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 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 Signature, typed or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE ☐ Change Addition NAME CARR, JAMES B. 1.2 NAME 15717 113TH TRAIL N. STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 1.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition TITLE 21 TITLE 2 2 NAME NAME CARR, TERRI H. 15717 113TH TRAIL N. 2.3 STREET ADDRESS STREET ADDRESS JUPITER FL 2.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

14. Thereby 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 receivor 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.

6.3 STREE1 ADDRESS

SIGNATURE:

CITY-ST-ZIP

414198

(561)747-8134

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