2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # K30271

1. Entity Name
PROTEC COOLING TOWERS, INC.

Principal Place of Business
6935 NW 50TH STREET
MIAMI FL 33166-5633

Mailing Address
6935 NW 50TH STREET
MIAMI FL 33166-5633

1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip | Country

4. FEI Number 65-0087734 | Applied For | Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOTOLONGO, ALFREDO
6935 NW 50TH ST
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City | FL | Zip Code

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 Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
PTVD	SOTOLONGO, ALFREDO	660 CALATRAVA AVE	CORAL GABLES FL 33143	☐ Delete
V	PEREZ, RENE	1845 S.W. 87TH PL.	MIAMI FL 33165	☐ Delete
V	SABATER, ENRIQUE	10137 S.W. 117TH COURT	MIAMI FL 33186	☐ Delete
VSD	SOTOLONGO, GLORIA	660 CALATRAVA AVE	CORAL GABLES FL 33143	☐ Delete
VD	SOTOLONGO-ABINADER , GLORIA	750 CORONADO AVE.	CORAL GABLES FL 33143	☐ Delete
VD	SOTOLONGO, ALFREDO M	10700 SW 7TH ST	PINE CREST FL 33156	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition
				☐ Change ☐ Addition

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02/21/07-80062-018 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFREDO SOTOLONGO 2/7/07 (305) 594-3684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #