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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K33985

(8)

JON'S AIR CONDITIONING & REFRIGERATION, INC.

SIGNATURE: X Value & Bath

		· · · · · · · · · · · · · · · · · · ·		<del></del>			
Principal Place of Business		Mailing Address		E SANGOLI DON DITON LISTA INTOLUMENTAL	TIBLE BIBLE BIBLE BIBLE BIBLE	AIRIE IBB!	
171 HOOD AVENUE. STE 5A P.O. BOX 820 TAVERNIER FL 33070-7820		171 HOOD AVENUE. STE 5A P.O. BOX 820 TAVERNIER FL 33070-0820					
TATEMIEN TE SOUTO TOES		THE STATE OF THE S		3. Date Incorporated or Qualified	ncorporated or Qualified 3a, Date of Last Report		
					09/20/1988	01/31/1996	A
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			65-0074684	<del></del>	t Applicable
Suite, Apt 1	***************************************	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	equired
City & State		City & State			6. Election Campaign Financing	\$5.00	
<b>23</b> Zip	Country	28       Zip	Country		Trust Fund Contribution	Added t	
24	25 29 30		<u> </u>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
		ime and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
DADI	rh, Jonathan D.		81	Name			
	FAIRWICH COURT		82	Stroot Add	ress (P.O. Box Number is Not Acceptab	la)	
	RNIER FL 33070		02	Sireer Add	ress (F.O. Box Number is Not Acceptab	ie)	
,,,,,,	CHILLITE OOOLO		83			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			84	City	***************************************	85 Zip	Code
				<u> </u>		FL   s   z   p	
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized by	/ the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing it at the appointment as	s registered registered
	n familiar with, and accept the oblig	ations of, Suction 607.0505, P	Torida Statute:	S.			
SIGNATURE .	Signature, typed or printed name of registered agr	ent and tind if applicable (NC	TE: Registered Age	ent signature requ	ired when reinstaling)	DATE	
12.		D DIRECTORS	13.	.,	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12
TITLE	P	DELETE	1.1 TITLE			☐ Change	Addition
NAME	Barth, Jonathan D.		1.2 NAME		1		
STREET ADDRESS	128 FAIRWICH COURT		1.3 STREET	ADDRESS			
CHY-ST-769	TAVERNIER FL		1.4 CHTY - S	ST-ZIP	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
TITLE	VST DELETE		21 TITLE			L_  Change	Addition
NAME	BARTH, VALERIE C.		22 NAME				
STREET ADDRESS	128 FAIRWICH COURT		23 STREET				
CHY-ST-ZIP	TAVERNIER FL	☐ DELETE	2.4 D(TY-	ST-ZIP		Change	Addition
TITLE		L.J VELETE	31 TITLE			TTI Cusulte	L Addition
NAME			32 NAME				
STREET ADDRESS			33 STREET	1			
CITY-ST-7IP TITLE		DELETE	3.4. CITY - 4.1 TITLE	S1-2IP		Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY - ST - ZIP			4.4 CITY-5				
TITLE		☐ DELETE	5.1 TITLE		,	Change	Addition
NAMÉ			5.2 NAME				
STREET ADDRESS				T ADDRESS			
City - St - ZiP			5 4 CITY-5	ST-ZIP			
7/11/5		DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	I ADDRESS			
City - St - ZIP			6.4 CITY - 3	ST-ZIP			
14. I do hereb	ny certify that the information supplier	ed with this filing does not qua	alify for the exe	emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify that	the
Lam an of	flicer or director of the corporation on h Block 12 or Block 13 if changed, c	r the receiver or trustee empo	owered to exec	cute this repo	ort as required by Chapter 607, Florida S	Statutes; and that my	name

CER OR DIRECTOR