

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Murtham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02844 (3)

1. Corporation Name

JACARANDA AIR CONDITIONING APPLIANCE SERVICE CORP.



Principal Place of Business

**1821 W OAKLAND PARK BLVD
OAKLAND PARK FL 33311**

Mailing Address

**1821 W OAKLAND PARK BLVD
OAKLAND PARK FL 33311**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

g. Name and Address of Current Registered Agent

**CAMPBELL, ASTON
~~1360 NW 54 TERRACE~~
LAUDERHILL FL 33315**

81 Name

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

83 **1601 SW 67 Ave**

84 City **Pompano Beach** FL

85 Zip Code **33068**

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 of Registered Agent or Secretary of State

Signature of Registered Agent or Secretary of State

15%

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE
NAME **CAMPBELL, ASTON**
STREET ADDRESS **1801 SW 67TH AVE.**
CITY-STATE-ZIP **POMPAHO FL 33068**

TITLE **DSV** ☐ DELETE
NAME **CAMPBELL, BRENDA**
STREET ADDRESS **5434 NW 10TH CT. #106**
CITY-STATE-ZIP **PLANTATION FL 33313**

TITLE **VICE PRESIDENT D.C.** ☐ DELETE
NAME **WARREN WHITE**
STREET ADDRESS **19711 NW 11 Court**
CITY-STATE-ZIP **No. Miami, FL 33169-3005**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14 TITLE
15 NAME
16 STREET ADDRESS
17 CITY-STATE-ZIP

21 TITLE **DSV** ☒ Change ☐ Addition
22 NAME **Gordon, Brenda Staggis**
23 STREET ADDRESS **5435 NW 10 Ct. #106**
24 CITY-STATE-ZIP **Plantation, FL 33313**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 its registered agent 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 in Block 14 if added with an address.

SIGNATURE: **ASTON CAMPBELL** (954) 239-3441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)