


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000046532</b> 1. Entity Name <b>JORGE ADAN AIR CONDITIONING SERVICE LLC</b>	
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Principal Place of Business <b>67-05 ESCONDIDA DR. WEST PALM BEACH, FL 33406 US</b>	Mailing Address <b>67-05 ESCONDIDA DR. WEST PALM BEACH, FL 33406 US</b>
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**DO NOT WRITE IN THIS SPACE**



02112008No Chg-LLC

CR2E083 (12/07)


4. FEI Number <b>65-0515721</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**ADAN, JORGE  
67-05 ESCONDIDA DR.  
WEST PALM BEACH, FL 33406**

**DO NOT WRITE  
IN THIS SPACE**

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:  2-11-08  
(NOTE: Registered Agent signature required when reinstating) DATE


**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000828102  
02/22/08-80016-020 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR ADAN, JORGE 67-05 ESCONDIDA DR. WEST PALM BEACH, FL 33406</b>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  2/11/08 561-7222405  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #