


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90011 043 ****55.00

DOCUMENT # L05000018770	
1. Entity Name HEAT BUSTER AIR CONDITIONING, LLC	

Principal Place of Business 3960 NW 34 WAY LAUDERDALE LAKES, FL 33309	Mailing Address 3960 NW 34 WAY LAUDERDALE LAKES, FL 33309
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2. Principal Place of Business 4800 NE 12 AVE Suite, Apt. #, etc.	3. Mailing Address 4800 NE 12 AVE Suite, Apt. #, etc.
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City & State OAKLAND PARK FL	City & State OAKLAND PARK FL
Zip 33334	Zip 33334
Country USA	Country USA

03162006 Chg-LLC CR2E083 (11/05)

4. FEI Number
05-0618107

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent DOMANY, JACQUES G 3960 NW 34 WAY LAUDERDALE LAKES, FL 33309	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DOMANY, JACQUES G 3960 NW 34 WAY LAUDERDALE LAKES, FL 33309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Jacques G. Domany **3-23-06** **754-224-8614**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #