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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L13057

(9)

FLORIDA CLIMATE CONTROL INC.

Principal Place of Business Mailing Address 2504 CENTER AVE. 2504 CENTER AVENUE FT. LAUDERDALE FL 33305 FT. LAUDERDALE FL 33305-1914							
US		US			3. Date Incorporated or Qualified	3a. Date of L 04/26/19	
2. Principal P	lace of Business	2a. Mailing Address			09/01/1989 4. FEI Number	04/20/18	Applied For
21	H	Suite, Apt. #, etc.			65-0151880		Not Applicable
Suite, Apt. # etc.		27		5. Certificate of Status Desired		.75 Additional see Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	ng \$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	,	8. This corporation has liability for		
24	[25]	29	30			Yes No	
THE	9. Name and Address of Curr	ent Hegistered Agent	81	Name	10. Name and Address of New F	tegistered Agent	
	4 CENTER AVENUE		82	Stroot Add	ross (D.O. Bay Number in Not Accept	-ahla)	
FT.	LAUDERDALE FL 33305		<u> </u>	Street Add	ess (P.O. Box Number is Not Acceptable)		
			83				
			84	City	MANUAL	FL 85	Zip Code
SIGNATURE	Signature, typicd or purhear) ame of registered a	agent and fite if applicable (NC	TE Registered Age		poration submits this statement for the tion's board of directors. I hereby acc	DATE	
12.	PSD OFFICERS A	ND DIRECTORS DELETE	13. 1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFF	CHS AND DIRE	
NAME	THESSA S. PACKARD		1.2 NAME				
STREET ADDRESS	2504 CENTER AVENUE		1.3 STREET	ADDRESS			
CITA- ST-541	FT. LAUDERDALE FL V	(A)		6T- ZIP			
TITLE NAME	COLLED IEDDY		2.1 TITLE 2.2 NAME			L_j Ch	nange Addition
STREET ADORESS	2504 CENTER AVENUE		2.3 STREET	ADDRESS			
CITY-SI-ZIF	FORT LAUDERDALE FL		2 4 CITY -	\$1-7IP			
TOTLE		☐ DELETE	3.1 TITLE			☐ CH	nange Addition
NAME Otossa Albabasas			3.2 NAME				
STREET ADORESS CITY ST ZIP			3.3 STREET	1			
TITLE		DELETE	3.4. CITY~:	51-211		Ch	nange Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-S1-ZIF		TThrieve	4.4 CITY-S	ST-ZIP		F-1 2.	
TITLE		☐ DELETE	5.1 TITLE			☐ Ch	nange Addition
NAME STREET ADORESS			5.2 NAME 5.3 STREET	Anorese			
CITY- ST- ZIP			5.4 CITY-S				
TITLE	To the second of	☐ DELETE	6.1 TITLE			Ch	nange Addition
!							

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the receiver 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 on an attachment with an address.

6.3 STREET ADDRESS 6.4 City-St-Zip

SIGNATURE:

STREET ADDRESS

THESSA S. PACKAGE THE DIRECTOR OF SIGNING OFFICER OF DIRECTOR

4/1/97 (954) 568-9480

FILED

Apr 09 1997 8:00am

Secretary of State