2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED May 04, 2004 08:00 AM Secretary of State

DOCH	MENT	`# I	M03000000298
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1. Entity Name

COMFORT PRODUCTS DISTRIBUTING LLC



Principal Place of Business

Mailing Address

2665 S. BAYSHORE DR., STE. 901 COCONUT GROVE, FL 33133

2665 S. BAYSHORE DR., STE. 901 COCONUT GROVE, FL 33133



04192004 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number	
	65-0718431	
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Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6.	Name ar	nd Addres	ss of Curre	nt Registered	i Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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		· ·	IIIIS SFACE
	named entity submits this statement for the purpose of chan ions of registered agent.	ging its registered office or registered agent, or	both, in the State of Florida I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE_Registered Agent signature required when reinstating) DATE
Fi	iling Fee is \$50.00 ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS	MGR LOGAN, BARRY 2665 S. BAYSHORE DR., STE. 901		000000155275 05/05/04-80031-005 50.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	COCONUT GROVE, FL 33133 MGR MENENDEZ, ANA M 2665 S. BAYSHORE DR., STE. 901 COCONUT GROVE, FL 33133		
TITLE NAME STREET ADDRESS GITY+ST-ZIP		DO	O NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
title name street address			

11. I 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 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

JRE: BARRY S. LOGAN, MGR.
SIGNATURE AND TYPED OR PRINTED INDUSE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

305 714-4119