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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90117 009 ***150.00

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DOCUMENT # M04856

1. Corporat on Name

J.R. AIR CONDITIONING CORP.

						<u> </u>	14 11	11 616 11		
Principal Place of Business Mailing Address								4.5		
8418 N.W. 61 STREET 8418 N.W. 61 STR										
MIAMI FL 33166		MIAMI FL 33166				DO NOT WRITE IN	THIS S	PACE		
						3. Date Incorporated or Qualifed				
						08/31/1984				ļ
2 Principal Pla	ace of Business	2a. Mailing Address				4. FEI Nu nber Applied For				
Z. Principal Pil	ace of business					59-2442271	Not Applicable			
Suite, Apt. #	t atc	Suite, Apt. #, etc.				\$8.75 Additional				
22		27				5. Certificate of Status Desired Fee Required				
City & State		City & State				_6Election.Campaign Financing \$5.00 May Be				-
23		Zip Country				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	——————————————————————————————————————			8. This corporation owes the current your		ear intangole		
24	25	29	30			Personal Property Tax. A Lyes L No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curren	r Registered Agent		81	Name	10. Hanne and Address of New Rogist	21007	90/11		
DUD	RIGUEZ, JOSE A			•	Hamo					
	NW 36 AVE		82			fress (P.O. Box Number is Not Acceptable)				
MIAMI FL 33125										
MINT	MITE 33123			83				_		
				84	City		FL	85	Zip C	ode
	# # # # # # # # # # # # # # # # # # #	C and 607 1509 Elarida State	toe the a	boyo	named cc t	poration submits this statement for the purpo	se of d	L_L hangir	a its r	egistered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	r f Florida. Such change was	.authorized	1 DV 1	the corporati	ion's board of clirectors. I hereby accept the	apş oint	ment a	as reg	stered
SIGNATUF:E						<u></u>				
	Signature, typed or printed name of registered agen	- 		Agent	signature require	ed when reinstating) DA			OTO)O IN 42
12.	,	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER	_	Cha		Addition
TITLE	PD	☐ DELETE	1.1 TF						inge	
NAME	RODRIGUEZ, JOSE ANTONIO		1.2 N/							
STREET ADDRESS	1881 NW 36 AVE		1.3 STREET A		ADDRESS					
CITY-ST-ZIP	MIAMI FL			TY-ST	-ZIP		——	Cha	2000	Addition
TITLE	D	☐ DELETE	, 2.1 TI						nige	☐ Addition
NAME	RODRIGUEZ, MARIANA		2.2 N/	AME						
STREET ADDRI SS	1881 NW 36 AVE	1		2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI_FL			ITY-S	T-ZIP					Addition
TITLE		☐ DELETE	3.1 TI					Cha	a ige	☐ vaanou
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS		ADORESS					
CITY-ST-ZIP			_	3.4. CITY-ST-ZIP						
TITLE		☐ DELETE	4 1 TI	TLE				Cha	ange	Addition
NAME			4. 2 N	4. 2 NAME						
STREET ADDR :SS	ADDR ESS		4.3 STREET ADDRESS							
CITY-ST-ZIP		- <u> </u>	4 4 CI	TY-\$1	r-ZIP			F3.5		
TITLE		☐ DELETE	5 1 TI] Cha	ange	Addition [
NAME			52 N/							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				ITY-ST	:-ZIP					
TITLE		☐ DELETE	6.1 TI	TLE				Ch:	ange	Addition
NAME			6.2 N	AME						
STREET ADDRESS			63 S	TREET	TADDRESS					

CITY-ST-ZIP 14. here by 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 pertify 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 region very continuous 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 a darkets with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: