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## Jan 23, 2001 8:00 am DOCUMENT # P0000028592 **Secretary of State** 1. Entity Name FIVE STAR AIR CONDITIONING CORP. 01-23-2001 90130 045 \*\*\*150.00 Principal Place of Business Mailing Address 1770 W. 40TH ST. BAY #9 1770 W. 40TH ST. BAY #9 HIALEAH FL 33012 HIALEAH FL 33012 **UUUUUTUU** 2. Principal Place of Business 1770 W. 40 ST. 3. Mailing Address 8501 N.W. 181 ST. Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 65-0989443 Applied For Not Applicable Country U.S. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERTO VALDES VALDES, ROBERTO Street Address (P.O. Box Number is Not Acceptable) 1229 W. 72ND ST. HIALEAH FL 33014 8501 N.W 181 ST. Zip Code 330/5 e of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PRESIDENT Change ☐ Addition Delete TITLE. TITLE ROBERTO VALDES 8501 N.W. 181 ST. VALDES, ROBERTO NAME NAME STREET ADDRESS STREET ADDRESS 1229 W. 72ND ST. HIALEAH, FL 33015-2536 CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33014 VICE PRESIDENT TITLE TITI F ☐ Addition ☐ Delete JESUS HERNANDEZ NAME HERNANDEZ, JESUS NAME 285 W. 56 ST. STREET ADDRESS STREET ADDRESS 285 W. 56TH ST. HIALEAH, FL 33012 CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33012 SECRETARY Change ☐ Addition TITLE TITLE ☐ Delete TUAN B. ORTIZ ORTIZ, JUAN B NAME NAME 1250 W. 53 ST. STREET ADDRESS STREET ADDRESS 1250 W. 53RD ST. HIALEAH, FL 33012 CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33012 TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 or supplied all 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 empoyed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver of changed, or on an attachment with

all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: