

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90152 039 ***150.00

DOCUMENT # P00000106725

Entity Name
ANDREWS HEATING & COOLING, INC.

Principal Place of Business

**8426 N AVENUE
 ZEPHYRHILLS FL 33540**

Mailing Address

**38426 N AVENUE
 ZEPHYRHILLS FL 33540**

Principal Place of Business

38422 N AVENUE

Suite, Apt. #, etc.

Zephyrhills, FL 33540

City & State

Zip

33540

Country

USA

3. Mailing Address

38422 N. AVENUE

Suite, Apt. #, etc.

Zephyrhills FL

City & State

Zip

33540

Country

USA

4. FEI Number

59-3890020-59-3890020

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**IAMURRI, PASQUALINA
 38426 N AVENUE
 ZEPHYRHILLS FL 33540**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

NAME	D ANDREWS, JASON A	<input type="checkbox"/> Delete
STREET ADDRESS	38426 N AVENUE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
NAME	D IAMURRI, PASQUALINA	<input type="checkbox"/> Delete
STREET ADDRESS	38426 N AVENUE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540	
NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D ANDREWS, JASON A	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	38426 North AVENUE	
STREET ADDRESS	Zephyrhills FL, 33540	
CITY-ST-ZIP		
TITLE	D IAMURRI, Pasqualina	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	38422 North AVE	
STREET ADDRESS	Zephyrhills, FL 33540	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(813) 779-1171

CR2E034 (9/01)