

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

**DOCUMENT # P01000074242**

1. Entity Name  
**RAVEN AIRCONDITIONING AND REFRIGERATION SERVICES, INC.**



FILED

06 MAY -2 PM 4: 06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04062006 REIN-P CR2E098 (11/05) 05-06

Principal Place of Business  
**18134 SANDY POINTE DR  
TAMPA, FL 33647**

Mailing Address  
**17808 FRUITFIELD DR  
LUTZ, FL 33649**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number  
**59-3749250**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**DELA VEGA, ROBERTO A  
18134 SANDY POINTE DR  
TAMPA, FL 33647**

7. Name and Address of New Registered Agent  
Name **ROBERTO DELA VEGA A.**  
Street Address (P.O. Box Number is Not Acceptable)  
**14542 Beauvy Cr.**  
City **Hudson** FL Zip Code **32314**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Roberto Vega* **President & Registered Agent** **4/25/06**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$300.00**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GERMINO, EMIDIO J 8301 N 46TH STREET TEMPLE TERRACE, FL 336176907 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEILA DELA VEGA 14542 Beauvy Cr. Hudson, FL 32314 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELA VEGA, ROBERTO A 8301 N 46TH STREET TEMPLE TERRACE, FL 336176907 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DELA VEGA, ROBERTO SR. 14542 Beauvy Cr. Hudson, FL 32314 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Roberto Vega* **President** **4/25/06** **(813)863-0763**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #