

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080070

Entity Name: ALL AIR OF SOUTH DADE, INC.

FILED
Jun 17, 2005
Secretary of State

Current Principal Place of Business:

17890 SW 264 STREET
HOMESTEAD, FL 33030

New Principal Place of Business:

205 NORTH FLAGLER AVENUE
HOMESTEAD, FL 33030

Current Mailing Address:

17890 SW 264 STREET
HOMESTEAD, FL 33030

New Mailing Address:

205 NORTH FLAGLER AVENUE
HOMESTEAD, FL 33030

FEI Number: 65-1139438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAAS, JOHN P ESQ
44 NE 16 STREET
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DIBENNEDETTO, RICHARD
Address: 17890 SW 264 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: DIBENNEDETTO, WANDA
Address: 17890 SW 264 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: O () Delete
Name: DIBENEDETTO, ROCCO S MR.
Address: 1515 EUCLID AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROCCO DIBENEDETTO

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06/17/2005

Electronic Signature of Signing Officer or Director

Date