2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Jan 31, 2006 08:00 AM DOCUMENT # P02000002697 **Secretary of State** 1. Entity Name A WILLETS-O'NEIL INDUSTRIAL FANS, INC. Principal Place of Business Mailing Address 2340 WEST 8TH LANE 7200 BISCAYNE BLVD. HIALEAH FL 33010 MIAMI FL 33138 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied Fo 80-0022235 Not Applie Zıp Country Zip Country \$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 WILEN, BARRY A ESQ Street Address (P.O. Box Number is Not Acceptable) **4601 SHERIDAN STREET** SUITE 208 HOLLYWOOD FL 33021 City Zip Code 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 auxiliary the statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and auxiliary the statement of the purpose of changing its registered affect of the purpose of changing the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and into it applicable (NOTE Registered Agent signature required when reinstaling) FILE NOW!II FEE IS \$150,00 9. Election Campaign Financing \$5.00 May: After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fee Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Ad: U00000411090 NAME SCHEMER, STEVEN B NAME 02/89/86-80064-003 150.00 STREET ADDRESS STREET ADDRESS 2340 WEST 8TH LANE CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP ☐ Delete TITLE 7)71 F □ Advice Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-208 CSTY-ST-ZSP TITLE ☐ Detete MILE □ Change □ A\*\*\*\*\* NAME NAME STREET ADDRESS STREET ADDRESS C35Y - ST - 709 CITY-ST-ZIP TITLE ☐ Defete BILL ☐ Channe MANAGE NAME STREET ADDRESS STREET ADDRESS CHY- ST- 21P CHTY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Add" NAME NAME STREET ADDRESS STREET ACORESS City-St-70 CITY-ST-ZIP TITLE ☐ Delete MALE ☐ Change □ ^- ···· NAME NAME STREET ADDRESS STREET ADDRESS City-SI-709 C174 - ST - 21P 12. I hereby certify that the information supplied with this filting-does not qualify for the exemptions contained in Section 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 true expowered 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 hiddress, with all pluer like empowered.

**FILED**