## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)/

## FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90276 009 \*\*\*150 00

	MENT # Pozooco Air Conditionin Walnut St		110.			04-24-2003	- 90276 00	09 ***150.00	
2214	Walnut St ndo FC 3280	>6	·/						-
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Principal Place of Business     3. Mailing Address					_	110138	<b>42</b>	`	
2214 Walnutst					_		1 2		
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE				
City & State	ndo FC	City & State			4. FEI Number	059275	56	Applied For Not Applicable	le
Zip	Zip Country Zip		. Country		• 5. Certificațe of		\$8.°	75 Additional Required	_
2786	26 Orange	32806			7. Name and Add	ress of Current Re			Ⅎ.
Name Christopher M. Walsh									
DO NOT WRITE  Street Address (P.O. Box Number is Not Acceptable)  Address (P.O. Box Number is Not Acceptable)									
	IN THIS SP	ACE	.						
			. [	City Octo	indo		FL Z	io Code	-
	named entity submits this statement for	the purpose of changing if	ts registere	d office or registe	ered agent, or both,	n the State of Florid	a. I am familia	ar with, and accept	
the obligati	ions of registered agent.							,	
SIGNATURE .	Signature; typed of printed name of registered agent a	nd litte if applicable. (NC	TE: Registered	Ageni signature require	od when reinstaling)		, DATE		
, Jar	iuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00				9. Election	on Campaign Financ	ino '	\$5.00 May Be	
	Amended UBR is \$61.25 Payable to Florida Department of	State				Fund Contribution.		Added to Fees	
10.	OFFICERS AND I					* *			
TITLE	President	watch	TITLE					•	2/02
NAME STREET ADDRESS	Christopher M. 2214 Walnut S Orlando, FL 32	et.	NAME STREE	T ADDRESS		•	•		CR2E034B (12/02
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CITY-ST-ZIP			CITY	L L	**		•, • , ,		
, 12. I,hereby c	pertify that the information supplied with	this filing does not qualify for	or the exem	nption stated in S	ection 119.07(3)(i), F	lorida Statutes. I für	ther certify th	at the information	7

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03 Date 407-491-3342