


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2007 08:00 A
Secretary of State

DOCUMENT # P02000109537	
1. Entity Name JORGE VALIDO AIR CONDITIONING & REFRIGERATION, INC.	

Principal Place of Business 15300 SW 10TH ST MIAMI, FL 33194	Mailing Address 15300 SW 10TH ST MIAMI, FL 33194
--	--

DO NOT WRITE IN THIS SPACE



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0119505	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DIAZ, OSVALDO J 7951 S.W. 40TH STREET SUITE 206 MIAMI, FL 33155

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST VALIDO, SANDRA 7951 SW 40TH ST #206 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALIDO, SANDRA 7951 S.W. 40TH STREET, SUITE 206 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VALIDO, JORGE 7951 S.W. 40TH STREET, SUITE 206 MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

W00000785233
05/31/07-80030-020 150.00

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: *Sandra Valido* 5/18/07 305-225-2550
SIGNATURE OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #