

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000029793					
1. Entity Name TARGET AIR CONDITIONING & REFRIGERATION "CORP"					
Principal Place of Business 3325 GRIFFIN RD STE 218 FORT LAUDERDALE FL 33312 US			Mailing Address 3325 GRIFFIN RD STE 218 FORT LAUDERDALE FL 33312 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 33-1056364	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent RUCCO, ROBERT M 3325 GRIFFIN RD STE 218 FORT LAUDERDALE FL 33312			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 accept the obligations of registered agent					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE	☐ Change	☐ Add
NAME	RUCCO, ROBERT M		NAME		
STREET ADDRESS	3325 GRIFFIN RD #218		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		CITY-ST-ZIP	000000451415	03/10/06-00053-010 158.75
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Add
NAME	RUCCO, ROBERT M		NAME		
STREET ADDRESS	3325 GRIFFIN RD #218		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
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CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing 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 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: *Robert Rucco* **ROBERT RUCCO** PRES 2/26/06 925-3300 (954)