

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90026 022 ***150.00

DOCUMENT # P03000074294 1. Entity Name DELTA AIR CONDITIONING, INC.			
Principal Place of Business 11980 SW 144 COURT SUITE 202 MIAMI, FL 33186		Mailing Address 11980 SW 144 COURT SUITE 202 MIAMI, FL 33186	
2. Principal Place of Business - No P.O. Box # 16427 SW 84 St.		3. Mailing Address 16427 SW 84 St.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33193		Zip 33193	
Country 		Country 	
4. FEI Number 37-1470959		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DE LA FUENTE, RICARDO 6726 SW 130TH PL #1410 MIAMI, FL 33183		7. Name and Address of New Registered Agent Name De la Fuente Ricardo Street Address (P.O. Box Number is Not Acceptable) 16427 SW 84 St. City MIAMI FL Zip Code 33193	
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 <u><i>[Signature]</i></u> DATE <u>3-12-08</u> <small>Signature, typed or embossed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP D DE LA FUENTE, RICARDO 6726 SW 130TH PL #1410 MIAMI, FL 33183	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP D De la Fuente, Ricardo 16427 SW 84 St. Miami, FL 33193	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP D HUERTAS, MIRZA G 6726 SW 130TH PL #1410 MIAMI, FL 33183	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP D Huertas, Mirza G. 16427 SW 84 St. Miami, FL 33193	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP V OVES, RICARDO O 11980 SW 144 COURT MIAMI, FL 33186	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP V Oves, Ricardo O. 16427 SW 84 St. Miami, FL 33193	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>[Signature]</i></u> 3-12-08 <small>Signature, typed or embossed name of signing officer or director Date Daytime Phone #</small>			