

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 03, 2005 8:00 am
Secretary of State

03-03-2005 90172 012 ***150.00

DOCUMENT # **P03000112524**

1. Entity Name

COOL-RITE Air Conditioning, Inc.



DO NOT WRITE IN THIS SPACE

40025139

2. Principal Place of Business

7700 BRANAM BLVD

Suite, Apt. #, etc.

3. Mailing Address

7700 BRANAM BLVD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIRAMAR FLORIDA

City & State

MIRAMAR FLORIDA

4. FEI Number

41-2111583

Applied For

Not Applicable

Zip

33023

Country

U.S.A.

Zip

33023

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **JOSEPH F. ROCCO**

Street Address (P.O. Box Number is Not Acceptable)

7700 BRANAM BLVD

City **MIRAMAR**

FL

Zip Code

33023

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**S/O
ROCCO, JOSEPH F.
7700 BRANAM BLVD.
MIRAMAR, FL 33023**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered

SIGNATURE

JOSEPH F. ROCCO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 1, 2005 961-2223

Date

Daytime Phone #

CR2E034B (12/02)