## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P0400003900

1. Entity Name

RANDY'S A/C AND APPLIANCE REPAIR, INC.



Principal Place of Business Mail

4521 70 AVE NO. PINELLAS PARK, FL 33781 US

ıc

Mailing Address

P.O. BOX 626

PINELLAS PARK, FL 33780 · US

FILED Apr 30, 2007 08:00 Al Secretary of State



## DO NOT WRITE IN THIS SPACE

04022007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0563811

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGE, RANDEL R 4521 70 AVE NO PINELLAS PARK, FL 33781

SIGNATURE?

## DO NOT WRITE IN THIS SPACE

| 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 |   |  |
|---|---|---|-------|---|---|--|
| FILE NOWIII FEE IS \$150.00<br>After May 1, 2007 Fee will be \$550.00   |   | <ol> <li>Election Campaign Financ<br/>Trust Fund Contribution.</li> </ol> | ing 🔲 | \$5.00 May Be<br>Added to Fees                  |   |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | OFFICERS AND DIRECT P GEORGE, RANDEL R 4521 70 AVE NO PINELLAS PARK, FL 33781 | TORS  |       |   | U00000744981<br>05/16/07-80010-020 150.00 |  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | ·   |       | DO  | NOT WRITE                                 |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   |       | IN '  | THIS SPACE                                |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   |   |       |   |   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | ,   |   |       |   |   |  |
| 12. I hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver of 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 apprecase with all other key empowered. |   |   |       |   |   |  |