## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000028921

Entity Name: RICK'S AIR CONDITIONING, INC

12712 HAMPTON PARK BLVD

TAMPA, FL 33624

Address:

City-St-Zip:

FILED Oct 28, 2008 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
6731 N. AF TAMPA, F	RMENIA AVE L 33604 US	3			
Current Mailing Address:			New Mailing Address:		
4922 WISH TAMPA, F		6			
FEI Number	: 14-1902817	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MAGILL, J 4922 WISH TAMPA, F	HART BLVD	5			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: JULIE MA				
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P ( ) MAGILL, JULIE 4922 WISHAR <sup>*</sup> TAMPA, FL 33	Γ BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( FARRADAZ, AL 2931 W LERO' TAMPA, FL 33	Y ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( GONZALEZ, EI 8007 SHARON TAMPA, FL 33	DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	T ( )	) Delete RID	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JULIE MAGILL P 10/28/2008