2007 FOR PROFIT CORPORATION **ANNUAL REPORT** 

レンCUMENT # P04000059223

1. Entity Name

MOBILE CLIMATE PRODUCTS, INC.



FILED May 03, 2007 08:00 A **Secretary of State** 

Principal Place of Business

2811 S. NOVA ROAD

UNIT B1

SOUTH DAYTONA BEACH, FL 32119

Mailing Address

2811 S. NOVA ROAD

UNIT B1

DO NOT WRITE IN THIS SPACE

SOUTH DAYTONA BEACH, FL 32119



04272007

No Cha-P

CR2E034 (11/05)

4. FEI Number

20-0976435

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MALINIS, RICHARD P DPT 2811 S. NOVA ROAD **UNIT B1** 

SOUTH DAYTONA BEACH, FL 32119

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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 algosture required when reinstating)

П

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing

\$5.00 May Be Added to Fees

U00000758395 05/23/07-80106-024 150.00

Trust Fund Contribution. 10. OFFICERS AND DIRECTORS DPT TITLE NAME MALINIS, RICHARD P STREET ADDRESS 1531 LORIMIER RD. CITY-ST-ZIP JACKSONVILLE, FL 32207 DSVP TITLE NAME PERRY, MICHAEL C STREET ADDRESS 142 HOLLY HILL COURT CITY-ST-ZIP NEW SMYRNA BEACH, FL 32168 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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 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:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

