

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

5. **FILED**  
**Jun 30, 2006 8:00 am**  
**Secretary of State**

05-17-2006 90017 044 \*\*\*150.00

**DOCUMENT # P04000098076**

1. Entity Name  
**JR'S AUTO AIR, INC**



Principal Place of Business  
**605 W 27TH ST  
SANFORD, FL 32773 US**

Mailing Address  
**605 W 27TH ST  
SANFORD, FL 32773 US**

**66021088**



**DO NOT WRITE IN THIS SPACE**

05092008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**72-1584125**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**FLORES, JOSE M JR  
605 W 27TH ST  
SANFORD, FL 32773**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when renewing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 6, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLORES, JOSE M JR 605 W 27TH ST SANFORD, FL 32773
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IN THIS SPACE**

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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/28/06**  
Date Daytime Phone #