## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT

## Mar 03, 2006 8:00 am Secretary of State 03-03-2006 90110 039 \*\*\*150 00 DOCUMENT # P04000098582 **REX HOUSTON AIR CONDITIONING & REFRIGERATION.** INC. Principal Place of Business Mailing Address 156 PEARL AVE 156 PEARL AVE TAVERNIER, FL 33070 TAVERNIER, FL 33070 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0095853 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -HOUSTON, REX DO NOT WRITE 156 PEARL AVE TAVERNIER, FL 33070 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. Signature, typed or printed name of registered agent and title if applicable " (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be. FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10 OFFICERS AND DIRECTORS TITLE HOUSTON, REX NAME STREET ADDRESS 156 PEARL AVE TAVERNIER, FL 33070 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME -STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-21P TITLE NAME" STREET ADDRESS 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 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.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**