


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90305 028 \*\*\*150.00

<b>DOCUMENT # P05000087843</b>	
1. Entity Name <b>LOS ANDES AIR CONDITIONING INC</b>	

Principal Place of Business <b>330 ORANGE WAY WEST PALM BEACH, FL 33405</b>	Mailing Address <b>PO BOX 6144 LAKE WORTH, FL 33466</b>
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**60024619**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04012006 Chg-P CR2E034 (11/05)

4. FEI Number <b>16-1726741</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ZURITA, MILTON 330 ORANGE WAY WEST PALM BEACH, FL 33405 <i>Milton Zurita</i>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

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 *Milton Zurita* DATE **4/4/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> ZURITA, MILTON 330 ORANGE WAY WEST PALM BEACH, FL 33405 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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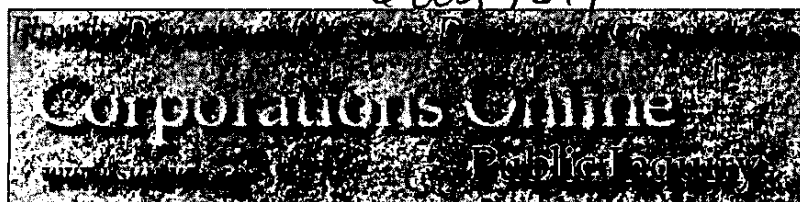
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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: *Milton Zurita* DATE **4/1/06** DAYTIME PHONE # **561-252-5512**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

6602 4619



## Florida Profit

### LOS ANDES AIR CONDITIONING INC

PRINCIPAL ADDRESS  
330 ORANGE WAY  
WEST PALM BEACH FL 33405

MAILING ADDRESS  
PO BOX 6144  
LAKE WORTH FL 33466

Document Number  
P05000087843

State  
FL

FEI Number  
NONE

Status  
ACTIVE

Date Filed  
06/20/2005

Effective Date  
NONE

## Registered Agent

Name & Address
ZURITA, MILTON 330 ORANGE WAY WEST PALM BEACH FL 33405

## Officer/Director Detail

Name & Address	Title
ZURITA, MILTON 330 ORANGE WAY WEST PALM BEACH FL 33405	P

## Annual Reports

Report Year	Filed Date
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ATTACHMENT

60024619

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No Events

No Name History Information

### Document Images

# P05000087843

Listed below are the images available for this filing.

06/20/2005 -- Domestic Profit

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

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