2006 FOR PROFIT CORPORATION, ANNUAL REPORT

FILED Aug 02, 2006 8:00 am Secretary of State 07-17-2006 90141 040 ***150.00

DOCUMENT # P05000089255 1. Entity Name COMMERCIAL APPLIANCE TECHNICIAN SERVICES, INC.							07-17-2000	5 901 41 040 **	**150.00	
Principal Place	e of Busines	s	Mailing Address .							
2405 W. 6TH LANE HIALEAH, FL 33010			2405 W. 6TH LANE Hialeah, Fl 33010			£ 194(1149) 11	66022548			
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			07102006	Chg-P	CR2E034 (11/05)		
City & State			City & State			4. FEI Numb	"3040408		oplied For of Applicable	
Zip	Country		Zip Cou		ntry			Fee Require	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					Name M	7. Name and	Address of New Reg	Jistered Agent		
ARGUELL 7891 W FL	AGLER S		Strg		Street Addres	ddress (P.O. Box Nyrgber is Alot Acceptable).				
MIAMI, FL 33144										
		/			Cithal	eah		FL Zinco	\$212	
8. The above	named eptit	submits this statement to	or the purpose of che	ingine its register	ed office or regis	stered agent, or bo	th, in the State of Florid	da. I am familiar with,	and accept	
ine conganoris pri requisiped agent.										
SIGNATURE Sonature, speed or princed named or reflector grandpris and other accelerate: (INOTE: Registered Agent signature required unen renetating) DATE										
FILE NOWIII FEE IS \$150.00 9. Election Campaign F Trust Fund Contribut						\$5.00 May Be Added to Fees	In accordance wit corporation did no	h s. 607.193(2)(b), of receive the prior i	F.S., the	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	 CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 11	
TITLE	P	CO NEWS	□ 0e		1		-	☐ Change	Addition	
NAME STREET ADDRESS	ARGUELLES, ALEXIS PRESS 2405 W 6TH LANE			STAL	E ADDRESS					
CITY-ST-ZIP				CITY-ST-ZIP						
TITLE	☐ Oelete 117							☐ Change	Addition	
NAME STREET ADDRESS	is l			NAME SIREET ADDRESS						
CITY-ST-ZP	a			CITY	-ST-ZiP					
mu	☐ Delete Trn.							Change	Addition	
STREET ADDRESS					ET ADORESS					
CITY-ST-ZIP					-SF-ZIP					
title Name			〔□ De	elete figu				☐ Change	Addition	
STREET ADDRESS				SIRE	ET ADORESS					
CITY - ST - ZIP					-51-20P					
TITLE NAME			□ 0e	elete Tittu Kam				☐ Change	Addition	
STREET ADDRESS					ET ADORESS					
CITY-ST-ZIP					-ST-ZIP			C (1		
TITLE NAME			□ 0e	ficte Titul				☐ Change	Addition	
STREET ADDRESS		Λ			ET ADDRESS -ST-ZIP					
12. I hereby o	entify that th	e information supplied wit	n this filing does not	_/		nerd in Chanter 119	3. Florida Statutes 1 for	ther certify that the in	lorgration	
12. Thereby carrify that the information supplied with this filing does not stability for the exemptions contained in Chapter 119, Florida Statutes. If 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 received, of rulete empowered to executery fits 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.										
SIGNAT	IIRE.	Xllmic	And	2. 0	<u>/</u>	:	2/14/00	0		
SIGNATURE: BIGNATURE AND TYPED ON PRINTED NAMEOF SIGNATO OFFICER OR DIRECTOR Date Daylore Proce #										