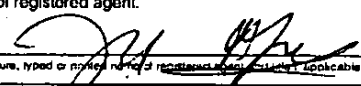
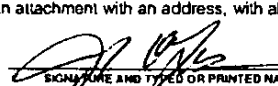


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 18, 2007 8:00 am
Secretary of State

05-17-2007 90034 041 ***150.00

DOCUMENT # P06000091890 1. Entity Name JOSE C. YANES AIR CONDITIONING & APPLIANCES SERVICES INC					
Principal Place of Business 1021 NE 132 STREET NO. MIAMI FL 33161			Mailing Address 1021 NE 132 STREET NO. MIAMI FL 33161		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-5350884	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent YANES, JOSE C 1021 NE 132 STREET NO. MIAMI FL 33161				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE:  (NOTE: Registered Agent signature required when re-registering) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P YANES, JOSE C 1021 NE 132 STREET NO. MIAMI FL 33161	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	YANES, JOSE C 1021 NE 132 STREET NO. MIAMI FL 33161	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	YANES, JOSE C 1021 NE 132 STREET NO. MIAMI FL 33161	☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	YANES, JOSE C 1021 NE 132 STREET NO. MIAMI FL 33161	☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  JOSE C. YANES 4/25/07 786-683-9345 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					