

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000093424

1. Entity Name

JET AIR CONDITIONING & REFRIGERATION, INC.



Principal Place of Business

460 27TH STREET SW
NAPLES, FL 34117 US

Mailing Address

460 27TH STREET SW
NAPLES, FL 34117 US

FILED

Jul 31, 2008 08:00 AM
Secretary of State



07292008 No Chg-P CR2E034 (11/05)

4. FEI Number

20-5211320

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THOMPSON, JAMES E
460 27TH STREET SW
NAPLES, FL 34117

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

U000000956802

07/31/08-80005-014 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 12, 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	PTS
NAME	THOMPSON, JAMES E
STREET ADDRESS	460 27TH STREE SW
CITY-ST-ZIP	NAPLES, FL 34117
TITLE	S
NAME	CARMONS, JOHNE
STREET ADDRESS	19740 HOBER RD
CITY-ST-ZIP	NORTH FORT MYERS, FL 33917
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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:

7/29/08

239-949-6538