


FILED
Jun 12, 2008 8:00 am
Secretary of State

06-12-2008 90002 005 ***150.00

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P07000000063		
1. Entity Name COX AIR CONDITIONING & ELECTRICAL SERVICES, INC.		
Principal Place of Business 20211 NE 10TH PLACE MIAMI, FL 33179		Mailing Address 20211 NE 10TH PLACE MIAMI, FL 33179
2. Principal Place of Business - No P.O. Box 3030 N.W. 162 St		3. Mailing Address 3030 N.W. 162 St.
State, Apt. #, etc.		State, Apt. #, etc.
City & State Miami, Garden, Fla		City & State Miami, Garden, Fla
Zip 33054		Zip 33054
Country USA		Country USA
4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent WIESEN, J LESLIE 20211 NE 10TH PLACE MIAMI, FL 33179		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when registering)</small> DATE 8/31/07		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	0 WIESEN, J LESLIE 20211 NE 10TH PLACE MIAMI, FL 33179 <input checked="" 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	Osborne Cox VP 3030 N.W. 162 St. Miami Garden Fla 33054 <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	Bernice Cox Ptd. 3030 N.W. 162 St Miami, Garden Fla 33054 <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
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
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
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: Osborne Cox Jr. <small>SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR</small>		Date 8/31/07 <small>Date</small>

ATTACHMENT

16004446

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Document Number P07000000063
Business Entity Name COX AIR CONDITIONING & ELECTRICAL SERVICES, INC.
Prior notice was Received
FEI Number 800193287
FEI Number Status
Certificate of Status Desired No

Election Campaign Financing Trust Fund Contribution No

Principal Place of Business

Address 3030 NW 162 STREET
City, State MIAMI GARDENS, FL
Zip Code & Country 33054

Mailing Address

Address 3030 NW 162 STREET
City, State MIAMI GARDENS, FL
Zip Code & Country 33054

Name And Address of Registered Agent

Name (Last, First, Middle, Title) WIESEN, J LESLIE
Address 20211 NE 10TH PLACE
City, State MIAMI, FL
Zip Code & Country 33179 US

Officer/Director Name And Address

Name And Address #1

Title VP
Name (Last, First, Middle, Title) COX, OSBORNE
Street Address 3030 NW 162 STREET
City, State MIAMI GARDEN, FL
Zip Code & Country 33054

Name And Address #2

Title P
Name (Last, First, Middle, Title) COX, BERNICE

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Street Address 3030 NW 162 STREET
City, State MIAMI, FL
Zip Code & Country 33054

Title V.P.
Officer/Director Signature OSBORNE COX, JR.

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Document Number P07000000063

Business Entity Name COX AIR-CONDITIONING & ELECTRICAL SERVICES, INC.

- ☐ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number 80 - 0193287

FEI Number Status Listed Above Applied For Not Applicable

Certificate of Status ☐ \$8.75 (Optional)

Election Campaign Financing Trust Fund Contribution Yes No

Principal Place of Business

Address 3030 NW 162 STREET (PO Box not acceptable)

Suite, Apt. #, etc.

City, State MIAMI GARDENS , FL

Zip Code & Country 33054

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise, enter your mailing address.

- ☐ Mailing address same as principal address

Address 3030 NW 162 STREET

Suite, Apt. #, etc.

City, State MIAMI GARDENS , FL

Zip Code & Country 33054

Name And Address of Registered Agent

Name (Last, First, Middle, Title) WIESEN , J LESLIE

- OR -

Business to serve as RA

Street Address in Florida 20211 NE 10TH PLACE

(PO Box not acceptable)

ATTACHMENT

Suite, Apt. #, etc.

City, State

MIAMI

, FL

Zip Code & Country

33179

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name And Address**Name And Address #1**

Title

VP

Name (Last, First, Middle, Title)

COX

, OSBORNE

- OR -

Entity Name to serve as Officer/Director

Street Address

3030 NW 162 STREET

City, State

MIAMI GARDEN

, FL

Zip Code & Country

33054

Name And Address #2

Title

P

Name (Last, First, Middle, Title)

COX

, BERNICE

- OR -

Entity Name to serve as Officer/Director

Street Address

3030 NW 162 STREET

City, State

MIAMI

, FL

Zip Code & Country

33054

Name And Address #3

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

ATTACHMENT

Zip Code & Country

Name And Address #4

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Name And Address #5

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Name And Address #6

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

V.P.

Officer/Director Signature

Osborne Cox, Jr.

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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Cox Air Conditioning & Electrical Services, Inc.

3030 N. W. 162nd Street, Opa Locka, Florida 33054 ♦ Telephone # (305) 623-3491

Division of Corporations
Annual Profit Corporation Report Filings
P. O. Box 1500
Tallahassee, Florida 32302-1500
Tel No. (850) 245-6056

June 9, 2008

Re: Filing Annual Corporation Report based on no Annual Report received for the following Corporation: **COX AIR CONDITIONING & ELECTRICAL SERVICES, INC.**

To whom it may concern,

I was advised to file the 2008 Annual Reports for my Corporations listed above because I have not received the 2008 Annual Report Forms and Annual Corporation Report is not due currently.

I contacted the Florida Department of State by phone and they suggested that I write this letter explaining that I never received the form and to file a new 2008 for Profit Corporation Annual Report, which I could download from your web site at (www.sunbiz.org). Enclosed is the Fee for the Corporation at the rate of \$150.00 for the Corporation, which is enclosed with this letter.

My document # is P07000000063. The address for the corporation is the same as the previous Annual Corporation Report. The address is: 3030 N.W. 162nd Street, Miami Gardens, Florida 33054 with the following telephone number (305) 623-3491. No changes are required on the Annual Report being filed.

Thank you for your help in this matter.

Sincerely,

Osborne Cox, Jr.

Osborne Cox, Jr., Vice President