## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000012703

Entity Name: AMERICOOL MECHANICAL SERVICES INC

**FILED** Aug 26, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

131 NE 186TH TER 13875 NW 22 AVE MIAMI, FL 33179

135

MIAMI, FL 33054

**Current Mailing Address: New Mailing Address:** 

13875 NW 22 AVE 131 NE 186TH TER MIAMI, FL 33179

MIAMI, FL 33054

FEI Number: 20-8328074 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, ALFONSO JOHNSON, ALFONSO 131 NE 186TH TER 13875 NW 22 AVE MIAMI, FL 33179 135 MIAMI, FL 33054 US

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.

SIGNATURE: 08/26/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition JOHNSON, ALFONSO JOHNSON, ALFONSO Name: Name: 13875 NW 22 AVE # 135 Address: Address:

131 NE 186TH TER MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33054

Title: Title: (X) Change ( ) Addition () Delete Name: WILLIAMS, CASSANDRA Name: WILLIAMS, CASSANDRA

131 NE 186TH TER 13875 NW 22 AVE #135 Address: Address: MIAMI, FL 33179 MIAMI, FL 33054 City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title: JOHNSON, SHEENA JOHNSON, SHEENA Name:

Name: 131 NE 186TH ST 13875 NW 22 AVE # 135 Address: Address: City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33054

Title: ( ) Delete Title: (X) Change ( ) Addition

JOHNSON, TERRYL JOHNSON, TERRYL Name: Name: Address: 131 NE 186TH TER Address: 13875 NW 22 AVE #135 City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KISHA JOHNSON MRS 08/26/2008