## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 7

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 03-06-2008 90060 001 \*\*\*149.00 DQCUMENT # P07000095117 03-06-2008 90060 002 \*\*\*\*\*1.00 1. Entity Name HY SAIR CONDITION CORP. Principal Place of Business Mailing Address 2752 NW 48 ST 2752 NW 48 ST 66002514 MIAMI, FL 33142 MIAMI, FL 33142 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02182008 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FLORES, HEGLER P Street Address (P.O. Box Number is Not Acceptable) 2752 NW 48 ST MIAMI, FL 33142 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\_ Signature, typed or original name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete Channe Addition TITLE NAME FLORES, HEGLER P NAME 2752 NW 48 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33142 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-7IP ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing roes not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementation of the corporation or the receiver or unseed ampowered 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 additional supplementation of the corporation or the receiver or unseed ampowered to execute this repowered.

FILED Mar 06, 2008 8:00 am

**Secretary of State** 

## ALIAUMENI

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

6002514

Pursuant to the provisions of sections 607.0502; 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name o	of the corporation: HYS AIR CONDITION CORP.
	al office address: # 10400095114
2752 NW 4	8 ST , MIAMI, FL 33142
3. The mailing	g address (if different):
4. Date of inco	prporation/qualification: 08232007 Document number: P07000095117
	nd street address of the current registered agent and registered office on file with the timent of State:
	HEGLER PFLORES
	2752 NW 48 ST
	MIAMI, FL 33142
	mIAMI, FL 33142  model of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered agent (if changed) and /or registered officer of the new registered officer of the new registered agent (if changed) and /or registered officer of the new registered officer of the new registered agent (if changed) and /or registered officer of the new registered of the new registered officer of the new registered of the ne
(if changed):	Registered Agent Division, llc
	. 13721 65 <sup>TH</sup> Street Suite 12
	(P.O. Box NOT acceptable)
	Largo, FL 33770
as changed wi	ress of its registered office and the street address of the business office of its registered agent, ll be identical.  was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
X (Sign	TX HEGIET PECADO FIOICE- nature of an officer or director)  (Printed or typed name and title)
I further agree of my duties, a document is b	of the appointment as registered agent and agree to act in this capacity.  The to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.
(Signate	re of Registered Agent) (Date)
If signing on l	pehalf of an entity:
(Typed or Printed )	Name)