

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000017228

**FILED**  
**Nov 21, 2014**  
**Secretary of State**

**Entity Name:** QUALITY CONTROL AIR OF SARASOTA, INC.

**Current Principal Place of Business:**

4240 JAMES STREET, SUITE 1  
PORT CHARLOTTE, FL 33980

**New Principal Place of Business:**

6311 PORTER ROAD  
SUITE #2  
SARASOTA, FL 34280

**Current Mailing Address:**

4240 JAMES STREET, SUITE 1  
PORT CHARLOTTE, FL 33980

**New Mailing Address:**

**FEI Number:** 45-4842632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ROSS, WARREN R ESQUIRE  
223 TAYLOR STREET  
PUNTA GORDA, FL 33950 US

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

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: WARREN R. ROSS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CHAVIANO, JONATHAN  
Address: 4240 JAMES STREET, SUITE 1  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: SECR  
Name: CHAVIANO, ANTONIO  
Address: 5367 COLONY COURT  
City-St-Zip: CAPE CORAL, FL 33904

Title: SECR  
Name: CHAVIANO, TERESA  
Address: 5367 COLONY COURT  
City-St-Zip: CAPE CORAL, FL 33904

I hereby 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 all other like empowered.

SIGNATURE: JONATHAN CHAVIANO

PRES

11/21/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date