FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P9200005467

1. Corporation Name

Principal Place of Business									
1356 GEORGETOWN CIR									
SARASOTA FL 34232									

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90073 047 ***150.00



ACTION A	IR CONDITIONING OF SAF	RASO	IA, INC.							
Principal Place	of Business	Mai	ling Address							
1356 GEORGETO		1356	GEORGETOWN CIR							
SARASOTA FL 34232 SARASOTA FL 34232							Ì	DO NOT WRITE IN TI	HIS SPACE	
								Date Incorporated or Qualifed 11/13/1992		
		22	Mailing Address				$-\dagger$	4. FEI Number		ed For
2. Principal Pla	ce of Business	26	Maining Fluoress				ļ	65-037 <u>4026</u>		pplicable
21		- 20	Suite, Apt. #, etc.				$\neg \uparrow$	5. Certificate of Status Desired	\$8.75 Add Fee Requ	
Suite, Apt. #	, etc.	27	·					J. Contracts of Table 2		
City & State		 	City & State				ļ	6. Election Campaign Financing	\$5.00 M Added to	
_		28						Trust Fund Contribution		-
Zip	Country		Zip		intry		ŀ	8. This corporation owes the current year	rintangible ' Ya Yes □]No
24	25	29		30				Personal Property Tax. 10. Name and Address of New Registe		
	9. Name and Address of Curren	t Regis	tered Agent		81	Name		10. Name and Address of Item tog		
					"					
	, KENNETH J				82	Street /	Addres	ss (P.O. Box Number is Not Acceptable)		
	GEORGETOWN CIR				83	 -				
SARA	ASOTA FL 34232				03					
					84	City			FL 85 Zip Co	Jue
				4 - M	<u> </u>	o named	corpoi		4 -kanaina ita r	egistered
11. Pursuant t	o the provisions of Sections 607.050	2 and 6 of Florid	07.1508, Florida Statu da. Such change was a	tes, the a authorize	d by	the corpo	oration	i's board of directors. I hereby accept the a	ppointment as regi	sterea
office or re agent. I ar	n familiar with, and accept the obliga	ations of	, Section 607.0505, Fl	orida Sta	tutes	S.		ration submits this statement for the purpose's board of directors. I hereby accept the a		
l								phen reinstating) DAT	E	
	Signature, typed or printed name of registered age OFFICERS AI	ent and title		13				ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
12.		AD DIKE	DELETE		TITLE	-			☐ Change	Addition
TITLE	DPST		_	1.21	NAME					Ì
NAME	PILAT, KENNETH J 1356 GEORGETOWN CIR			1.3	STREE	ET ADDRESS				
STREET ADDRESS	SARASOTA FL 34232			1.4	CITY-S	ST-ZIP	1			Addition
CITY-ST-ZIP	VP		DELETE		TITLE				☐ Change	☐ ¥aanan
TITLE	HUFF, JIM			2.2	NAME		İ			Ì
NAME	LASTA OF ORDETOWAL CIDCLE			2.3	STREE	ET ADDRESS	3			
STREET ADDRESS	SARASOTA FL 34232			2.4	CITY-	-ST-ZIP				☐ Addition
CITY-ST-ZIP	V		☐ DELETE		TITLE				☐ Change	☐ waannon
TITLE	SMITH, DOUG			3.2	NAME				-	•
NAME STREET ADDRESS	AND OF OPPOPETOMAL CID			3.3	STRE	ET ADDRESS	s			
	SARASOTA FL 34232		_	3.4	, CITY	-ST-ZIP	<u> </u>		Change	Addition
CITY-ST-ZIP TITLE	OF MINISTER STATES		DELETE	4.1	TITLE				□ Orlande	
NAME				4.3	2 NAM	E				
STREET ADDRESS				4.3	STRE	ET ADDRESS	s			
CITY-ST-ZIP				4.4	CITY	-ST-ZIP	-		☐ Change	Addition
TITLE			☐ DELETE	1	TITLE		1			
NAME					2 NAMI -					
STREET ADDRESS	3					ET ADDRES	85			
CITY-ST-ZIP						-ST-ZIP			Change	Addition
TITLE			☐ DELETE	- 1	1 TITLE				*	
NAME				- 1	2 NAM					
STREET ADDRES	s					EET ADDRES	~		•	
CITY, ST. 7IP	1			6.	4 CITY	- ST- ZIP		2 .V 440 07/2Vi) Florida Statutes I furt	ner certify that the	information

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 reporter or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if charped, et on an attachment with an address, with all other like empowered.

SIGNATURE: