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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P92000012994 (9)

TECHNO A/C, INC.

Principal Place of Business	Mailing Address	
7810 SW 127TH COURT MIAMI FL 33183	7810 SW 127TH COURT MIAMI FL 33183-4223	

FILED Mar 13 1997 8:00am Secretary of State



7810 BW 127T MIAMI FL 8316		7810 SW 127TH COURT MIAMI FL 33183-4223								
						3. Date Incorporated or Qualified 12/18/1992	3a. Date of 06/11/		eporl]
2. Principal Place of Business 2e. Mailing Address					4. FEI Number	1. 4-11		plied For	1	
21 26					65-0412390		\vdash	t Applicable	1	
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additional			
22 27		27]				5. Certificate of Status Desired		Fee Re		1
City & State	City & State City & State					6. Election Campaign Financing	¢	5 00	May Be	1
23						Trust Fund Contribution			to Fees	1
Zip	Country	Zip				·				1
24	25	29	F-3 F3			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ✓ Yes No				
9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
ETY	OLD, MARK		1	31 Name)					1
	0 S.W. 127TH COURT									1
				Stree	t Addre	ss (P.O. Box Number is Not Acceptab	l o)			
MIA	MI FL 33183		<u> </u>	33						+
			ľ							
i			[34 City			85	Zip (Code	1
dd Disamont	to the providing of Castiana CO7 OF	100 007 4100 Fly-13- 00-1					FL_ ^~	<u></u>		4
11. Pursuant office or r	to the provisions of Sections 607.03 registered agent, or both, in the Sta	502 and 607,1508, Florida Statuti te of Florida. Such change was a	es, the abo authorized	ove-name by the co	d corpo rooratio	oration submits this statement for the pi on's board of directors. I hereby accep	urpose of char tithe appointm	nging it nent as	s registered registered	
agent. I a	m familiar with, and accept the obli	igations of, Section 607.0505, Fid	orida Statu	tes.		, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			
SIGNATURE										
	Signature, typed or printed name of registered a			Agent signatu	re required	d when reinstating)	DATE			J,
12.		ND DIRECTORS DELETE	13.		1	ADDITIONS/CHANGES TO OFFICE				18
TITLE	D	L] DELETE	1,1 TOTA		1		·	Change	Addition	15
NAME	ETZOLD, MARK		1.2 NAM	•	1					3
STREET ADDRESS	7810 SW 127TH COURT		1.3 STR	EE1 ADDRESS						Į
CITY-ST-ZIP	MIAMI FL 33183			-ST-ZIP	┩					Įģ
TITLE	D	□ DELETE	ETE 2.1 TITLE		1		L.J (Change	Addition	1
NAME	ETZOLD, ANA M	2.2 N		Ε		•				
STREET ADDRESS		, , , , , , , , , , , , , , , , , , , ,		ET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33183		2. 4 CIT	Y - ST - ZIP						
TITLE		DELETE	3.1 TH L	F				Change	Addition	
NAME			3.2 NAM	IE.		4				1
STREET ADORESS			3.3 STR	EFT ADDRESS						1
CITY-ST-ZIP			3.4. CIT	7-ST-71P						ı
TITLE		DELETE	4.1 TITE	E				Change	Addition	1
NAME			4. 2 NAI	AE.						
STREET ADDRESS			4.3 STR	ET ADDRESS						l
CITY-ST-ZIP				-ST-ZIP	İ					
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NAME			5.2 NAM					-		
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CITY-ST-ZIP				- \$7 - ZIP						
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			1							
STREET ADDRESS			1	ET ADDRESS						
City-St-ZIP			6.4 CH1Y	-ST-ZIP	1					1

I do 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 eath; that I am an officer or director of the corporation or the receiver or trustee empayered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if that god, and that my name