

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morse
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 10 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000015553 (0)

1. Corporation Name

TEMP CONDITIONING SERVICE INC.

Principal Place of Business

10055 S.W. 12TH TERRACE
MIAMI FL 33174

Mailing Address

PO BOX 557054
MIAMI FL 33255
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/04/1993

3a. Date of Last Report

01/21/1994

4. FEI Number

65-0379993

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 7754 NW 71 STREET

2a. Mailing Address

26 Suite, Apt. #, etc.

22 State, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

MIAMI, FL

28 City & State

29 Zip

30 Country

24 33166

25 USA

9. Name and Address of Current Registered Agent

HERNANDEZ, PAUL
10055 S.W. 12TH TERRACE
MIAMI FL 33174

10. Name and Address of New Registered Agent

81 Name

HERNANDEZ, PAUL

82 Street Address (P.O. Box Number is Not Acceptable)

7754 NW 71 STREET

83

84 City

MIAMI

85 FL

86 Zip Code

33166

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date

(NOTE: Registered Agent signature required when resigning)

Apr. 4, 1995

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HERNANDEZ, PAUL
STREET ADDRESS	10055 S.W. 12TH TERRACE
CITY - ST - ZIP	MIAMI FL 33174
TITLE	SD
NAME	HERNANDEZ, HELENA
STREET ADDRESS	10055 S.W. 12TH TERRACE
CITY - ST - ZIP	MIAMI FL 33174
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	HERNANDEZ, PAUL	
1.3 STREET ADDRESS	7754 NW 71 STREET	
1.4 CITY - ST - ZIP	MIAMI, FL 33166	
2.1 TITLE	SD	☒ Change ☐ Addition
2.2 NAME	HERNANDEZ, HELENA	
2.3 STREET ADDRESS	7754 NW 71 STREET	
2.4 CITY - ST - ZIP	MIAMI, FL 33166	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 receiver 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 4/95 305-5979798