

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93 000001382  
1. Entity Name  
Blue Marlin Air Conditioning, Inc.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 SEP 25 PM 2:56

Principal Place of Business #D  
9350 SW 61st Way  
Boca Raton, FL 33428  
Mailing Address  
PO Box 162825  
Miami, FL 33116-2825

2. Principal Place of Business  
9350 SW 61st Way  
Suite, Apt. #, etc.  
#D  
City & State  
Boca Raton, Florida  
Zip  
33428  
Country  
USA  
3. Mailing Address  
PO Box 162825  
Suite, Apt. #, etc.  
City & State  
Miami, Florida  
Zip  
33116-2825  
Country  
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number  
65-0390005  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
Rockman, Louis M.  
8500 SW 92 St., Ste. 106  
Miami, FL 33156

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL  
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.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒  
FILE NOW!!! FEE IS \$550.00  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
Make Check Payable to Department of State  
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS, CHANGES TO, OR DELETIONS OF OFFICERS AND DIRECTORS IN YEAR		
TITLE	PSTD	<input type="checkbox"/> Delete	TITLE		
NAME	Biskup Scott M.		NAME		
STREET ADDRESS	9350 SW 61st Way #D		STREET ADDRESS		
CITY-ST-ZIP	Boca Raton, FL 33428		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS	900003416209--0	
CITY-ST-ZIP			CITY-ST-ZIP	-10/06/00--01020--002	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael S. Biskup Sept 22, 2000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date  
306-273-0372

CR2E034 (5/00)

AD

**Blue Marlin Air Conditioning**  
P.O. Box 162825  
Miami, FL 33116-2825  
305-273-0372  
Fax\* 561-558-9582


September 15, 2000

Division of Corporations  
Uniform Business Report Filings  
409 East Gaines Street  
Tallahassee, FL 32399

Dear Sir/Madam:

I spoke with several representatives in the Division of Corporations as our company address has changed (although our company has filed this address change with the post office), however, we have not received any notification from you regarding our renewal. I was informed by the staff that I needed to advise you in writing of this and that we would overnight the appropriate forms as well as our check for \$150.00. If you should have any questions or need to speak with the President/Owner, please call the number above.

Respectfully,

  
Kristy Biskup  
Office Manager

Enclosures: Renewal form  
Check for renewal

PS. Had we been notified by mail, we would have paid on time - please allow us to renew without the late fee.

Respectfully,  
Kristy Biskup