## 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

## DOCUMENT # P93000021126 (6)

WESTSIDE AIR CONDITIONING SERVICE CORP.

Principal Place of Business

SIGNATURE

Mailing Address

16041 SOUTHWEST 61ST COURT FORT LAUDERDALE FL 33331 16041 SOUTHWEST 61ST COURT FORT LAUDERDALE FL 33331-1483

## FILED Jan 24 1997 8:00am Secretary of State



								03/17/1993 01/25			of Last Report /1996	
Principal Place of Business  21			<b>2a.</b> Mai	26. Mailing Address 26				4. FEI Number		A	pplied For	
			26					65-0396646			Not Applicable	
Suite, Apt.	#, etc		27 Suit	Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	е		City	& State				6. Election Campaign Financing		\$5.00	) May Be	
3			28					Trust Fund Contribution		Added	to Fees	
Zip		Country	Zip	· — ·				8. This corporation has liability for intengible tax under s. 199.032,				
4 25 29 29 9. Name and Address of Current Registered Agent						30		Florida Statutes Yes No  10. Name and Address of New Registered Agent				
		Address of Cu	rent Registered	ı Ağent	B1	Name		TO, Name and Address of New A	a A is round	Mair		
DE LA FE, ONIX 16041 SOUTHWEST 61ST COURT						VI   IVALUE						
						82 Street Address (P.O. Box Number is Not Acceptable)						
FO	E FL 33331											
					83							
					84	City			FL	<b>85</b> Zip	Code	
44 5		1.0	05.00	- 00 EL 11 BL		L		The state of the s			9	
office or r	to the provisions registered agent im familiar with, a	or both, in the S	ate of Florida. S	uch change was	authorized b	/ the co	rporatio	ration submits this statement for the on's board of directors. I hereby acce	purpose o	oointment as	s registered	
SIGNATURE				1	Str. Davisson d.A.				DATE			
12.	Signature, typed or po	nted haine of registere	AND DIRECTOF		TE Registered Ag	ant signati.	ne required	ADDITIONS/CHANGES TO OFFI		DIRECTO	PS IN 12	
TITLE	PD	OFFICENS	AND DINECTOR	DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFI	OLING AND	Change		
	DE LA FE, G	OVATOLIS								La Orlange	L Hodinor	
NAME			COLIDT		1.2 NAME		1					
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NAME	DE LA FE, C	ONIX			2.2 NAME							
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CITY - ST - ZIP		ERDALE FL 33			2. 4 CITY-							
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STREET ADDRESS					6.3 STREE		3					
CITY-ST-ZIP	<u> </u>				6.4 CiTY-							
-	Liby certify that the on indicated on the officer or director in Block 12 or Block	a information sup his annual report of the corporatio ock 13 if change	plied with this fill or supplementa p or the received d, or on an attac	ing does not qua I annual report is r or trustee empo chiment with an a	117 4 4 1 11		stated indicated that report	in Section 119.07(3)(i), Florida Statut my signature shall have the same leg as required by Chapter 607, Florida	ies. I furthe jal effect a Statutes; s	er certify that is if made us and that my	it the nder oath; name	