## 2003 FOR PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)** P94000005973 **DOCUMENT #**

FRANK'S HEATING & COOLING, INC.



**FILED** Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90487 048 \*\*\*150.00

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Principal Place of Business 121 CORPORATION WAY UNIT F VENICE FL 34292		Mailing Address 121 CORPORATION WAY UNIT F VENICE FL 34292				I ABBURBU MA JOHN OLON BONJ DOWN BONJ GOVERN BOND DOWN JOOD JOHN JOOD JOHN JOOD					
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2. Principal	Place of Business	3. Ma	3. Mailing Address					<b>i i</b> i i i i i i i i i i i i i i i i i	<b>6) 6/)(8 (8)()</b>	<b> 4000     4   150</b>	
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State				4. FEI Number 65-0459187				oplied For	
Zip Country Zip				Country			5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Currer	nt Registere	ed Agent			7.	Name and Address of New Re	gistered Ag	ent		
-	خور د <u>س</u> نچ <u>نیس</u>	. ***	2= -		Name	سعد بنست		-			
MASURA,	, FRANK G		Stroot Address			s (P.O. Box Number is Not Acceptable)					
121 COR	PORATION:WAY		Street Address			55 (F.O. L	(1.0. Box Nulliber is Not Acceptable)				
UNIT F	No.				·						
VENICE FL 34292					City			FL	Zip Cod	e	
the obliga SIGNATURE	tions of registered agent.  Signature, typed or printed name of registered age	int and title if app	slicable. (NOTE	: Registere	d Agent signature requ	uired when re	einstating)	, DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Final Trust Fund Contribution.	ncing		<b>0</b> May Be I to Fees	
10.	OFFICERS AN		11.			DITIONS/CHANGES TO OFFIC	ERS AND D	DIRECTOR	S IN 11		
TITLE NAME Street address City-St-Zip	PSTD MASURA, FRANK G 121 CORPORATION WAY VENICE FL 34292		☐ Delete					Į	Change	☐ Addition	
TTLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					]	Change	Addition Addition	
TITLE  NAME —  STREET ADDRESS  CITY-ST-ZIP			☐ Delete			Principal de la companya de la comp		. [	Change	☐ Addition	
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TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREE		•••		ſ	_ Change	Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

941-484-0058