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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000009204 (6) **DOCUMENT #**

STATE	AIR CONDITIONING, INC) .							
Principal Place of Business Mailing Address							II OD ill Boll o	M 18118 NO	II BOIII ÖLÜL HÜDT
5928 FOREST WEST PALM	T HILL BLVD. BEACH FL 33415	5928 FOREST HILL BLVD. WEST PALM BEACH FL 30415							
						3. Date Incorporated or Qualified 01/24/1994	,	of Last 6 5/01/19	-
 Principal Pl. 	ace of Business	2a. Mailing Address				4. FEI Number 65-0467870			Applied For Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. # etc.				5. Certificate of Status Desired			5 Additional Required
City & State	U' C	City & State				Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Ζφ 24	Country 25	Ζφ 29	30 Cour	ntry		This corporation has liability fo Florida Statutes	12	ix under s	; 199.032,
	9. Name and Address of Cur	rrent Registered Agent		44		10. Name and Address of New	Registered	Agent	
000054	4150100 4			81	Name	N/A			
	A, ALFONSO A			82	Street Add	dress (P.O. Box Number is Not Accepta	ible)		
5928 FOREST HILL BLVD. WEST PALM BEACH FL 33415			-	83					
11201 11	TEM DENOTITE GOTTO			84	City			85 2	Zip Code
							<u>FL</u>		·
or register familiar wit SIGNATURE	ed agent, or both, in the State of F th, and accept the obligations of, S Suparze gradio protest same of equations	foricia: Such change was author fection 607.0505, Florida Statute	zed by the c s.	orp	oration's boa	oration submits this statement for the pand of directors. I hereby accept the ap	pointment as	registere	d agent. I am
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AND		
Title	PT	DELETE 1		1.11(()		management of the second of th	J	Change	☐ Addition
NAME	CORREA, ALFONSO A		1.2 NA			MERTIN W.	. DJ	41-	:lo
STREET ACCIPESS	5928 FOREST HILL BLVD.	0445	13 ST		ADDRESS	West Palm Beac	10 Ka	. 77	3006
CHY-ST ZIP Tel.E	WEST PALM BEACH FL 33	3410 □ DHEIE	2 1 T		1-212	wen rain beac	4, F	_ Cnance	Addition
NAME	CORREA, JOSE A		2 2 NA				·	_ Change	
STHELL ADDRESS	5928 FOREST HILL BLVD.		2351	REE I	ADDRESS				
Qth -ST-ZIF	WEST PALM BEACH FL 33	3415	2401	TY-S	iT ZiP				
THE		DECETE	3 1 1)	TLE			(Change	Addition
hahir.			3.2 NA						
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N499		<u> </u>	4.2 NA						•
STESS ATTRESS			4350	REET	ADDRESS				
20Th + ST + ZIF			4 4 CI	TY - S	iT - ZIP				
TILF		DETELE	5 ! TI					Change	Addition
NAME.			5.2 NA						
STREET ADDRESS					ADDRESS				
City St 2if Yills		DELETE	54 CII		37.4			Change	Addition
NAM:		C Occent	52 NA				ı	change	L. Manion
STREET ADDRESS					ADDRESS				
CHY S1-ZIF			6.4 CI						
	1	The constitution of the co				facility as well to a state of the Destination	0.020.01.5.		

I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 of the receiver or trostee 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 a participant of the properties of the same legal effect and that my name appears in Block 12 or Block 13 if changed, or on a participant of the properties of the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the same legal effect as if made under the properties of the same legal effect as if made under the properties of the same legal effect as if made under the sam i an addenss.

SIGNATURE:

R PRINTED NAME ORS GNING OFFICER OR DIRECTOR

1-22-96 407-642-5025