

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP -9 PM 1:28

DOCUMENT # P94000025818 (3)

1. Corporation Name

GROVE AIR CONDITIONING, INC.



Principal Place of Business

Mailing Address

2300 SWANSON AVENUE
MIAMI FL 33133

2300 SWANSON AVENUE
MIAMI FL 33133

2. Principal Place of Business

2a. Mailing Address

21 4610 SW 75TH AVE

26 4610 SW 75TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
23 MIAMI, FL 33155

27 City & State
28 MIAMI, FL 33155

24 Zip Country

29 Zip Country

3. Date Incorporated or Qualified

04/01/1994

3a. Date of Last Report

05/01/1995

4. FET Number 65-0690198

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BERG, DAVID T ESO
2300 SWANSON AVENUE
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 of registered agent or person authorized to register agent and file if applicable

(607.1508) Registered Agent signature required, when applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE D XX DELETE
NAME GRAVES, CHRISTINA A
STREET ADDRESS 2300 SWANSON AVENUE
CITY - ST - ZIP MIAMI FL 33133

TITLE D XX DELETE
NAME GRAVES, JOHN C III
STREET ADDRESS 2300 SWANSON AVENUE
CITY - ST - ZIP MIAMI FL 33133

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PRESIDENT XX Change
12 NAME GRAVES, JOHN C. II
13 STREET ADDRESS 2300 SWANSON AVE
14 CITY - ST - ZIP MIAMI, FL 33133

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

200001951392
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*****200.00 *****200.00

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN C. GRAVES II

8-6-96

305-260 0044

0042004 CP

CR2E034 (3/96)