2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 02, 2004 08:00 AM DOCUMENT # P94000026370 **Secretary of State** 1. Entity Name JVAC CUSTOM AIR SYSTEMS, INC. Principal Place of Business Mailing Address 4384 REDDING RD 4384 REDDING RD BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL. 33436 01282004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3234444 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent BURNS, JOHN V C DO NOT WRITE 4384 REDDING RD BOYNTON BEACH, FL 33436 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent SIGNATURE DATE Signature, typed or printed name of registered agent and title if appreadle (NOTE: Registered Agent signature regulied when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 000000027881 TITE F BURNS, JOHN V 02/04/04-80004-002 150.00 NAME 4384 REDDING RD STREET ADDRESS BOYNTON BEACH, FL 33436 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST ZIP

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.

NAME STREET ADDRESS CITY ST- 7P

SIGNATURE:

OR PRINTED NAME OF SIGNING OF