2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000034787

1. Entity Name

SIGNATURE: \(\)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Larry A. Lampariello

THERMAL MECHANICAL SYSTEMS, INC.

Zip Country Zip Country S. Certificate of Status Desired \$8.75 AM 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Per Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GROMANN, GLENN E 439 NE 7TH AVE FT LAUDERDALE FL 33301 City FL Zip Code 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. SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tas filing requirement and elects to do so. (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. DPS Debte NUMBERS SIRET ADDRESS TO OFFICERS AND DIRECTORS 11. DPS DPS Debte NUMBERS SIRET ADDRESS TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. DPARTELLO, LARRY A SIRET ADDRESS TO SIRET ADDRESS TO SIRET ADDRESS TO SIRET ADDRESS CITY SI JP NAME SIRET ADDRESS CITY SI				
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13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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	nformation			

4/25/00

973-483-1458

FILED

May 24, 2000 8:00 am Secretary of State

05-24-2000 90182 001 ***150.00