2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P94000060022

1. Entity Name

A/C SPECIALISTS, INC.



FILED Jan 10, 2003 8:00 am Secretary of State 01-10-2003 90056 021 ***150.00

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Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country S. Certificate of Status Desired \$8,75 Additional Fee Required Section 1 of Section 2 of	Principal Place of Business 15433 N FLORIDA AVE TAMPA FL 33613 US 2. Principal Place of Business				Mailing Address 15433 N FLORIDA AVE TAMPA FL 33613 US 3. Mailing Address							
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Zip Country Zip Country S. Certificate of Status Desired \$8,75 Additional \$8,75 Addit	•	. #, etc.	Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
Some and Address of Current Registered Agent F. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.C. Box Number is Not. Acceptable) Street Address (P.C. Box Number is Not. Acceptable) TAMPA FL 33613 The acover named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rick is an tamilist with, and accept the designation of registered agent. Signal URE System Address (P.C. Box Number is Not. Acceptable) The acover named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Rick is an tamilist with, and accept the designation of registered agent. Signal URE System Address (P.C. Box Number is Not. Acceptable) The Address (P.C. Box Number is Not. Acceptable) The Address (P.C. Box Number is Not. Acceptable) The Number is Not. Acceptable) The Address (P.C. Box Number is Not. Acceptable) The Number is Not. Acceptable) The Address (P.C. Box Number is Not. Acceptable) The Number is Not. Acceptable) The Address (P.C. Box Number is Not. Acceptable) The Number is Not. Acceptable is not accept the Number address (P.C. Box Number is Not. Acceptable) The Number is Not. Acceptable is not accept the Number addr	City & State				City & State				FEI Number 59-3260021		_	-
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15.433 N FL AVE TAMPA FL 33613 Since Address (PO. Box Number is Not. Acceptable) Title Tit	,					}	Name					
TAMPA FL 33613 City FL Zp Code 6. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floride. I am startal a with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITTLE NAME STREET ADDRESS CITY ST. 2P TAMPA FL 33613 TILE NAME STREET ADDRESS CITY ST. 2P TIL		•				-	Street Address	s (PO B	(P.O. Roy Number is Not Acceptable)			
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B. 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 collegations of registered agent. Signature Signature Signature systems at registered agent.	tampa fi	L 33613										
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		ertify that the infi	ormation supplied with	thie filing	does not qualify for				+0.07/0V/\ EL \ \ \ 0.00		-	

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 truetee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813.948.7032