## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

Suite, Apt. #, etc.

City & State

P94000075895 (0)

Suite, Apt. #, etc.

3381030

City & State

QUALITY AIR-CONDITIONING AND REFRIGERATION INC.

Country

25

Principal Place of Business	Mailing Address	
4510 FLINTLOCK ŁOOP LAKELAND FL 33610 US	4510 FLINTLOCK LOOP LAKELAND FL 33809	

27

28

**FILED** 

May 01 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

3. Date Incorporated or Qualified

10/13/1994 4. FEI Number

59-3271959

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Personal Property Tax due June 30.

Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
WILSON, HARLEY J 4510 FUNTLOCK LOOP LAKELAND FL 33810		B1	Name	,			
		82 Street Address (P.O. Box Number is Not Acceptable)					
		83					
		84	City	85 Zip Code			
			_ ′				
l office or r	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							
12.	Signature, typed or printed name of registered agent and life # applicable (NOTE: Registere OFFICERS AND DIRECTORS 13.	d Ago	nt signature	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DELETE 111	ITI F		ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS IN 12			
NAME	WILSON, HARLEY J	1.2 NAME					
STREET ADDRESS	48.48 (0.18) (0.18) (0.08)	1.3 STREET ADDRES		·			
CHTY-ST-ZIP	4.4/70.44/5.5/	1.4 City-St-ZIP					
TITLE		2.1 TITLE		Change Addition			
NAME	2.2 N	2.2 NAME					
STREET ADDRESS	2.3 \$	TREET	address				
CITY-ST-ZIP	2.40	CITY-S	ST-ZIP				
TITLE	DELETE 31T	3 1 TITLE		Change Addition			
NAME	3.2 N	3.2 NAME					
STREET ADDRESS	3.3 \$	3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY - 8					
TITLE	DELETE 4.1 TI	4.1 TITLE		Change Addition			
NAME	4.2 M	AME	ļ				
STREET ADDRESS	4.3 S	TREET	ADDRESS				
CITY-ST-ZIP		ITY-S	T-Z(P				
TITLE	DELÊTE 5.1 TI			Change Addition			
NAME	5.2 N						
STREET ADDRESS	53\$	TREET	ADDRESS	·			
CITY-ST-ZIP		ITY S	r-ziP				
TITLE	<del>-</del>		}	Change Addition			
NAME	6.2 N						
STREET ADDRESS			ADDRESS				
CITY-ST-ZIP		(TY-\$		and in Section 110 07(3)(i) Florida Statutes I further cortify that the information			
14. Thereby 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 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 or the receiver or trustee 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 an attachment with an address.							

Country