

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

APPROVED AND FILED

1996 JUN 14 AM 11:01

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P94000093746 (3)**
 1. Corporation Name

FRANK'S AIR CONDITIONING, INC.



Principal Place of Business: **2260 EMPEROR DRIVE KISSIMMEE FL 34744**
 Mailing Address: **2260 EMPEROR DRIVE KISSIMMEE FL 34744**

2. Principal Place of Business: **18 S. BERMUDA AVE.**
 Suite, Apt. #, etc.: **SUITE E**
 City & State: **KISSIMMEE, FL.**
 Zip: **34741** Country: **U.S.A.**

3. Date Incorporated or Qualified: **12/09/1994**
 3a. Date of Last Report: **03/01/1995**
 4. FEI Number: **59-3285948**
 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
FUSCO, DENISE A
2260 EMPEROR DRIVE
KISSIMMEE FL 34744

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: _____ (Type or print name of registered agent and date accepted) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	
NAME	FUSCO, DENISE A	12 NAME	
STREET ADDRESS	2260 EMPEROR DRIVE	13 STREET ADDRESS	
CITY - ST - ZIP	KISSIMMEE FL 34744	14 CITY - ST - ZIP	
TITLE	D	21 TITLE	
NAME	FUSCO, FRANK J	22 NAME	
STREET ADDRESS	2260 EMPEROR DRIVE	23 STREET ADDRESS	
CITY - ST - ZIP	KISSIMMEE FL 34744	24 CITY - ST - ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

BANK

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **FRANK J. FUSCO** *Frank J Fusco* 6-16-96 407-870-7755
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)