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 # P95000048612 (2)

KOOLMAN AUTO AIR, INC.

FILED Apr 23 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						
1356 NW 65TH TERRACE PLANTATION FL 33313 US			1356 NW 65TH TER PLANTATION FL 33313			DO NOT WRITE IN THIS SPACE
Ų3		US				3. Date Incorporated or Qualified 06/20/1995
—	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26			·····	65-0626950 Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc. 27			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zipi	Co	untry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Pres No
	9. Name and Address of Curre	ent Registered Agent		81		10. Name and Address of New Registered Agent
O'BRIEN, STEPHEN E					Name	
7620 NW 38TH COURT				62	Street Ad	Idress (P.O. Box Number is Not Acceptable)
SU	NRISE FL 33351					
				83		
				84	City	85 Zip Code
						orporation submits this statement for the purpose of changing its registered
SIGNATURE				ed Age		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	111	ITLE		Change Addition
NAME	o'Brien, Stephen e		121	IAME		
STREET ADDRESS	7620 NW 38TH COURT		138	STREET.	ADDRESS	
CITY-ST-ZIP	SUNRISE FL 33351		140	DITY-SI	1-2IP	
TITLE		☐ DELETE	21 T	ITLE		Change Addition
NAME			22 N	IAME		
STREET ADDRESS			235	STREET.	ADDRESS	
CITY - S1 - ZIP			2.41	CITY-S	31-ZIP	
TITLE		☐ DELETE	311			☐ Change ☐ Addition
NAME			32 N	IAME	1	
STREET ADDRESS			335	FREET.	ADORESS	
CHY-ST-ZIP				CITY-S	ST - ZIP	
TITLE		☐ DELETE	411		Ì	Change Addition
NAME			1	NAME	1	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CHIY - SI	T-ZIP	A Live
TRILE		DELETE	511			☐ Change ☐ Addition
NAME			52 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				HY-S1	T-ZIP	
THUE		DELETE	611			Change Addition
NAME			62 N			
STREET ADDRESS					ADDRESS	
CITY-ST-7IP			640	HY-S	T-ZIP	

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.