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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

NAME

STREET ADDRESS

appears in Block 12 or Block 13 if changed, or on

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000022084 (3)

ZANDERS AIRCONDITIONING SERVICES INC.

15151 SW 167 ST. 15151 SW 167 ST. MIAMI FL 33187-0807 MIAM! FL 33187 3. Date incorporated or Qualified 3a. Date of Last Report 03/08/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 Yes You 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZANDERS, DOLPHUS 15151 SW 167 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33187** 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition ZANDERS, JEAN NAME 1.2 NAME 15151 SW 167 ST. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33187** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE ZANDERS, DOLPHUS NAME 2.2 NAME 15151 SW 167 ST. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33187** CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE THLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4 1 TITLE Change Addition 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP DITY-ST-7/P DELETE Change ___ Addition TITLE 5.1 TITLE 52 NAME 53 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP 54 CiTY-ST-ZIP DELETE Change Addition TITLE 61 TITLE

JEAN ZAMDERS SIGNATURE:

n attachment with ar

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby 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 angular 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