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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000048589

1. Corporation Name

ROLANDO'S AIR CONDITIONING & REFRIGERATION, INC.

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90179 006 ***150.00



Principal Place	e of Business	Mailing Addr	ess						
6903 NW 83RD	ST		6903 NW 83RD ST						
TAMARAC FL 33321		TAMARAC FL 33321				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						06/04/1996			
2 Principal Di	lace of Business	2a. Mailing A	ddress			4. FEI Number			Applied For
- - '	lace of Business	<u> </u>	idule33			65-0676912			Not Applicable
21	#	26 Suite, Ap	t # etc			03-00/03/12	-		Additional
Suite, Apt.	#, etc.		i. #, eic.			5. Certifcate of Status Desired		•	Required =
22 -		27	nto.			a SI iii Gi Siconolor			
City & State		<u></u> ⊢ '	City & State			Election Campaign Financing Trust Fund Contribution			May.Be to Fees
23	Carrata	28		Country				_	1,01003
Zip	Country	Zip	Ε.	¬ ´	•	8. This corporation owes the curre	nt year intar	Yes	□No
24	25	29	30	<u> </u>		Personal Property Tax. 10. Name and Address of New Ro	naictored A	_\	
	9. Name and Address of Curre	nt Registered Age	ent	81	Name	10. Name and Address of New Ki	igistereu A	Aevir	
BOLANOS, ROLANDO JR				61	Name				
					Street Address (P.O. Box Number is Not Acceptable)				
	NW 83RD ST				<u></u>				
IAM	ARAC FL 33321			83					
				84	City			85 Zip	Code
				64	City		FL		
SIGNATURE	Signature, typed or printed name of registered ag		(NOTE: Re		nt signature requir	ed when reinstating)	DATE	- DIRECT	ORS IN 12
12.		ND DIRECTORS	7.05; 575	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	Change	
TITLE	PSD	L	DELETE	1.1 TITLE					,
NAME	BOLANOS, ROLANDO JR			1.2 NAME		•			
STREET ADDRESS	6903 NW 83RD ST			1.3 STREE	TADORESS				
CITY- ST- ZIP	TAMARAC FL 33321		_	1.4 CITY- 9	T-ZIP				
TITLE			DELETE	2.1 TITLE		•		Change	Addition
NAMÉ				2.2 NAME					
STREET ADDRESS				2.3 STREE	T ADDRESS	•		~	
CITY-ST-ZIP				2.4 CITY-	ST-ZIP	·			
TITLE			DELETE	3.1 TITLE				Change	e 🔲 Addition
NAME				3.2 NAME	-				
STREET ADDRESS				33STREE	TADDRESS				
CITY-ST-ZIP				3.4. CITY-					
TITLE			DELETE	4.1 TITLE			HARRY	Change	e 🔲 Addition
NAME				4. 2 NAME					
					TADDRESS				
STREET ADDRESS				4.4 CITY-S	1				
CITY-ST-ZIP TITLE		Г	DELETE	5.1 TITLE	,			Change	e 🗋 Addition
			· -	5.2 NAME				-	
NAME					T ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP			T OF LETT	5.4 CITY-8 6.1 TITLE	01-ZIP			Change	e Addition
TITLE		L	DELETE						, <u> </u>
NAME	1			6.2 NAME					
STREET ADDRESS	1			6.3 STREE	TADDRESS				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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 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, of on all attachment with an address, with all other like empowered.

SIGNATURE:

02/02/99

(954) 485-2000

Daytime Phone #