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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000054793 (0)

Advanced Air and Refrigeration Inc.

Mailing Address Principal Place of Business 12165 METRO PARKWAY #24B 12165 METRO PARKWAY #24B FT MYERS FL 33912-8301 FT MYERS FL 33912 3. Date Incorporated or Qualified 3a. Date of Last Report 06/27/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0667866 215 Robinwood Circle 21 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 FLocida Sanibel 23 28 Trust Fund Contribution Added to Fees Country Ζιρ Country This corporation has liability for intangible tax under s. 199.032, 3957 SIA Fiorida Statutes Yes No 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BLAZE, WILLIAM A 12165 METRO PARKWAY #24B 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33912 83 City Zip Code 11. Pursuant to the previsions 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. William A. Blaz Presiden SIGNATU Registered Agent a gnature required when re OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. ☐ Change Addition TITLE □ DELETE 1.1 TITLE William A. Blaze 1.2 NAME NAM: 12165 Metro Parkway U-24B STREET ADDRESS 1.3 STREET ADDRESS Fort Myers, Florida 33912 1.4 CITY-ST-ZIP City - St - ZiP Change DELETE Addition 11118 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CHY-S1-ZIF 2 4 CITY-ST-ZIP DELETE Change Addition Hitte 3.1 TITLE 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 011Y-\$1-7P DELETE Change ☐ Addition 4 1 TITLE THILE NAME 4.2 NAME STREET ACIDRESS 43 STREET ADDRESS 4.4 City-St-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-51-26 900002156419 ange -04/28/97--01034--024 DELETE Addition TITLE 6.1 TITLE 6.2 NAME 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 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.

SIGNATURE:

STHEET ADDRESS

City-St-Zir

941-768-555R

FILED

Apr 24 1997 8:00am

Secretary of State