24

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

PROFIT CORPORATION ANNUAL REPORT

1997

7404 NW 8th **S**t Miami, FL 33126

33126

Country

9. Name and Address of Current Registered Agent

2. Principal Place of Business

7462 N.W.

City & State

Miami



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

2960006436d

7404 NW. 8th 5t

7462 N.W. 8th

Miami, FL 33126

2a. Mailing Address

Suite, Apt. #, etc.

Miami,

Zip

28

29

Rama Air Conditioning, Inc.

Principal Place of Business Mailing Address

'						
	3. Date incorporated or Qualified 0.8 - 0.1 - 9.6	3a. Date of Last Report				
t	4. FEI Number 65 - 0686311		Applied For Not Applicable			
	5. Certificate of Status Desired		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees			
	Election Campaign Financing Trust Fund Contribution					
	8. This corporation has liability for intangible tax under s. 199 032,					

Name and Address of New Registered Agent

May 19 1997 8:00am

Secretary of State

Country

F1 33126

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE					Committee Consider a final consideration on the supplementary and the	
	Signature, typed or ported name of registered agent and little diapple			required when roinstating)	DATE	
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	P/V/ S/T	DELETE	1 1 TITLE		☐ Change	Addition
NAME	Bascoy, Manuel Jr.		12 NAME		·	
STREET ADDRESS	7404 NW 8th S t		1.3 \$1REET ADDRESS			į
CITY - ST - ZIP	Miami, F1 33126		1.4 CITY - \$1 - 7(P)			
title	V/P/5	DELETE	2 1 1ITLE		☐ Change	Addition
NAME	Rolando Dieguez		22 NAME			
STREET ADDRESS	347 N.W. 57th Ct		2.3 STREET ADDRESS			1
CITY-ST-ZIP	Miami F1 33126	-	2 4 DRY+ST;7IP			
THTLE	,	DELETE	3 1 1171.6		'nge	Addition
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS		,	
CITY-S1-ZIP			34 CITY+\$1-ZIP			
TOTLE		DELETE	4.1 TiTLE		Change	Addition
NAME		!	4 2 NAME			
STREET ADDRESS			4 3 STREET ADORESS			
CITY - ST - ZIP			4 4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TITLE		Change	Addition
NAME		I	5.2 NAME	20000219	8872	
STREET ADDRESS			5 3 STREET ADDRESS	-06/03/970100	15006	
CITY - ST - ZIP			5.4 C(1Y - S1 - Z)P	***165.00	. 	
TITLE		DELETE	6 1 TITLE		Change	Addition
NAME		į	62 NAME			40
STREET ADDRESS			6.3 STREET ADDRESS	I		05
CITY - ST - 74P			6.4 CITY-S1-ZIP	I	4	5/19/97

14. I do hereby certily that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutos 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.

CIONATURE CONTRACTOR IN

4-8-97 305-262-1121