

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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000071278 (1)
1. Corporation Name
APOLLO AIR CONDITIONING AND REFRIGERATION, INC.

Principal Place of Business
4995 N. COCOA BLVD.
STE. 44
COCOA FL 32927
US

Mailing Address
4485 DELESPINE RD.
COCOA FL 32927
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 345 MYRTICE AVE. #7
Suite, Apt. #, etc.

2a. Mailing Address
26 P.O. Box 541233
Suite, Apt. #, etc.

3. Date Incorporated or Qualified
08/27/1996

4. FEI Number
59-3402511
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

22 City & State
23 MERRITT ISLAND, FLA.

27 City & State
28 MERRITT ISLAND, FLA.

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 32953 25 U.S.A.

29 32954 30 U.S.A.

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SOBOLOWSKI, MARK
4485 DELESPINE RD.
COCOA FL 32927

10. Name and Address of New Registered Agent

81 Name
SOBOLOWSKI, MARK
82 Street Address (P.O. Box Number is Not Acceptable)
1140 OUTRIGGER DR.
83
84 City
MERRITT ISLAND FL 85 Zip Code
32953

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, type or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	SOBOLOWSKI, MARK	4485 DELESPINE RD.	COCOA FL 32927	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1	2.2	2.3	2.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1	3.2	3.3	3.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1	4.2	4.3	4.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1	5.2	5.3	5.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1	6.2	6.3	6.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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, or on an attachment with an address.

SIGNATURE: Mark Sobolowski MARK SOBOLOWSKI PRES. 3-31-98 407-452-8060

CR2E034 (10/97)