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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084178 (8)

STEVE'S AIR CONDITIONING & REFRIGERATION, INC.

## **FILED** Feb 16 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address		T TOBLICABLY LLA TALITA ALITLE ADPLIT DELITE DA	ALEK BRERA TREAK RANDA OLDATA DI	1001 (8(1 100)
2725 DRYER AVE.		2725 DRYER AVENUE	· ·				
LARGO FL 33770		LARGO FL 33770					
US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
A Distriction I D	lana al Ducinana	D. Marillan Andreas			10/09/1996		···
2. Principal Place of Business		·	2a. Mailing Address		4. FEI Number	<del></del>	opplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.	26 Suite Act # etc		59-3408396		lot Applicable
22 Suite, Apr. #, etc.		<b>├</b> ─¬	27		5. Certificate of Status Desired		Additional Regulred
City & State		· · · · ·- · · · · ·	City & State		6. Election Campaign Financing		
23		<b>├</b> ~~┐	28		Trust Fund Contribution		May Be I to Fees
Zip Country		Zip	<del></del>		8. This corporation owes or has pa		
24	25 29		30	<b>-</b>		·	
	g, Name and Address of C				10. Name and Address of New Re	gistered Agent	
80	OSE, STEPHEN K		81	Name			
2725 DRYER AVENUE			82	Stroot Add	ress (P.O. Box Number is Not Acceptate	nio\	
	RGO FL 33770		02	Silee( Add	ress (1.0. box Number is Not Acceptat	יטוע	
			83				
			84	C:5:	<del></del>	oc Zic	Code
			104	City		FL  85   Zip	Code
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Florida Statut	es, the abov	e-named corp	poration submits this statement for the p	ourpose 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	Signature, typed or printed name of register	ed agent and title if applicable (NO)	F Registered Ag	ent signature requi	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS 13.		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	•		1.1 THLE				☐ Addition
NAME	STEPHEN K BOOSE		1.2 NAME				
STREET ADDRESS	2725 DRYER AVE.	1.3 STREET ADDRES		ADDRESS			
CITY-ST-ZIP	LARGO FL		1.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE 2.1		1		Change	Addition
NAME	22		2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			1
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3,1 TITLE			☐ Change	Addition
NAME	NAME		3.2 NAME	ľ			
STREET ADORESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	·········		- <u> </u>
TITLE	DELETE 4.1		4,1 TITLE			Change	
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				ĺ
CITY - ST - ZIP				T-ZIP			
TITLE		☐ DELETE	5.1 TITLE	1		☐ Change	Addition
NAME	5.2		5.2 NAME				]
STREET ADDRESS	ADDRESS 5		5.3 STREET	ADDRESS			
City - ST - ZIP			5.4 City - 9	T - ZIP			
TITLE	DELETE		6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	Ì			Ì
STREET ADDRESS			63 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	T-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, or on an attachment with an address.

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