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 # P97000002923

1. Corporation Name

ACCURATE AIR CONDITIONING AND APPLIANCE SERVICES , INC.

Principal Place of Business
1130 SW 85 TERR PEMBROKE PINES FL 33025
US US

Mailing Address

1130 SW 85 TERR PEMBROKE PINES FL 33025 Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90001 048 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					01/10/1997		
2. Principal Place of Business 2a. Mailing Address			5		4. FEI Number	Ap	plied For
21					65-0785531	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip	Count	try	This corporation owes the current year in Personal Property Tax.	tangible	□No
	9. Name and Address of Current				10. Name and Address of New Registered	Agent	
	I-SANG, DAVE SW 85 TERR			Name Street Add	tress (P.O. Box Number is Not Acceptable)		_
PEM	BROKE PINES FL 33025		1	33			
	, ·	•	8	34 City	FL	85 Zip (Code
office or n agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	if Florida. Such change was au	ithorized t	ov the comporati	poration submits this statement for the purpose o ion's board of directors. I hereby accept the appo	f changing its intment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent signature requir	red when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITL	E		☐ Change	☐ Addition
NAME	CHIN-SANG, DAVE		1.2 NAM	E			
STREET ADDRESS	1130 SW 85 TERR		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL 33025			-ST-ZIP			
TITLÉ	VP	☐ DELETE	2.1 TITL			Change	☐ Addition
NAME	CHIN-SANG, PAULINE	⇔ = .	2.2 NAW	1			•
STREET ADDRESS	1130 SW 85 TERR			EET ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL 33025			Y-ST-ZIP		Chanca	☐ Addition
TITLE	<u></u>	☐ DELETE	3,1 TITL	1		Change	☐ Addition
NAME	· · ·		3.2 NAM				
STREET ADDRESS			1	EET ADDRESS			
CITY-ST-ZIP			_	Y-ST-ZIP			□ Addition
TITLE		☐ DELETE	4.1 TIIL.			☐ Change	☐ Addition
NAME			4, 2 NAM				
STREET ADDRESS	,		1 "	EET ADDRESS			
CITY-ST-ZIP		[] ne. ****		/-ST-ZIP		☐ Change	Additio
TITLE		☐ DELETE	5,1 TITL			□ cisaiiûe	L_J AGOIGO
NAME			5.2 NAM				
STREET ADORESS				EET ADDRESS			
	1. 查案 /强 501 · 3. 金字 50 · 1			/-ST-ZIP		Chana	☐ Additio
TITLE :	\$39 Re 11384	☐ DELETE	6.1 TITL			☐ Change	☐ Addigo
	877 M. L		6.2 NAV				
STREET ADDRESS				EET ADDRESS			
	l		■ 64 CITY	(-ST-70P			

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 an attachment with an address, with all other like empowered.