

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

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000003046 (4)

1. Corporation Name

MECHANICAL AIR SERVICES, CORPORATION



Principal Place of Business

Mailing Address

2415 UELA LEE COURT  
OC0EE FL 34761

2415 UELA LEE COURT  
OC0EE FL 34761

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/10/1997

2. Principal Place of Business

2a. Mailing Address

21 446 N Dillard St

26 1583 E Silver Star

4. FEI Number

59-3418987

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite #2

27 Suite 101

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

City & State

23 Winter Garden, FL

28 OC0EE FL

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip

Country

Zip

Country

24

25 USA

29 34761

30 ORANGE

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

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

B&C Corporate Services of Central Florida Inc

82 Street Address (P.O. Box Number is Not Acceptable)

390 North Orange Avenue, Suite 1100

83

84 City

Orlando

FL

85 Zip Code

32801

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 By: Douglas E. Starcher, Vice President

DATE

4/21/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSD ☒ DELETE

NAME TAYLOR, KIMBERLY  
STREET ADDRESS 2415 UELA LEE COURT  
CITY-ST-ZIP OC0EE FL 34761

1.1 TITLE President ☐ Change ☒ Addition

1.2 NAME Doug Taylor  
1.3 STREET ADDRESS 2415 Uela Lee Ct  
1.4 CITY-ST-ZIP OC0EE FL 34761

TITLE V ☒ DELETE

NAME LARSON, CHARLES  
STREET ADDRESS 2415 UELA LEE COURT  
CITY-ST-ZIP OC0EE FL 34761

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE TD ☐ DELETE

NAME TAYLOR, DOUGLAS  
STREET ADDRESS 2415 UELA LEE COURT  
CITY-ST-ZIP OC0EE FL 34761

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE Se ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE Secretary ☐ Change ☒ Addition

4.2 NAME Kimberly Taylor  
4.3 STREET ADDRESS 2415 Uela Lee Ct  
4.4 CITY-ST-ZIP OC0EE, FL 34761

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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.

SIGNATURE:



1-3-98

407-523-2608

CR2E034 (10/97)