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

PROFIT
CORPORATION
*ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

IMENT # P910000 8857

FUSCO AIRCONDITION ING &HEATING INC

FILED Feb 10 1998 8:00am Secretary of State

	Fosco Miccoodii	too how the contract	1106 21001			
Principal Place of Business Mailing Address						
					E IN THIS SPACE	
				3. Date Incorporated or Qualified JANUARY 23	1997	
	Place of Business NW ACT * LOS LACOT L	2a. Mailing Address 26 4898 Mw 19	LT,	4. FEI Number 65.0723469	Applied For Not Applica	
Suite, Apt.	#. elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	ERONLL LAKES FL.	28 LAUDER OALL	LAKES FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 333	Country USA	29 33313	Country 30 US A	This corporation owes or has pa Personal Property Tax due June		
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent	
Hm	new J. Fusco	70	81 Name			
HODEN J. FUSCO JR. 4898 NW 29 TO CT. \$105 LOUDER DALLS LKS. FL 33313			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
			83	,		
5 10 ° 4		12 20213	84 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute of Florida, Such change was a	es, the above-named corporate	poration submits this statement for the place to be possible to the possible to be provided the provided the provided to the provided t	ourpose of changing its register	
agent. I a	am familiar with, and accept the obliga	itions of Section 607 0505, Flo	orida Statutes.	asing board or oncotors Thereby accep	A the appoint helit as registered	
SIGNATURE .	Signature typed or printed name of required days	et wast the disculse at a control (NOT)	Fillegistered Agent signature requi	and when remulation	E)ATI	
12.	OFFICERS AN!		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PRESIDENT/DIREC	TOR DELETE	11311([☐ Change ☐ Addit	
NAME	AMOREW T. PUSCO JA		1.2 NAME			
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STREET ADDRESS			6.3 STREET ADDRESS	8000024; -02/11/98010 ***150,00	119029	

4. I bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental cannual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trusted empowared to execute this report as required by Chapter 607, filorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a majorithment with an address.

SIGNATURE:

ATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

2-3-98 954-485-9191

32E034 (10/9)