

2007 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90036 047 ***150.00

DOCUMENT # P97000026477

1. Entity Name

Pasadena Heating & Air Conditioning
Inc



DO NOT WRITE IN THIS SPACE

40008504

2. Principal Place of Business

6417 Gulfport Blvd S

3. Mailing Address

6417 Gulfport Blvd S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pasadena, FL

City & State

Pasadena, FL

4. FEI Number

59-3433067

Applied For

Not Applied

Zip 33707

Country
Pinellas

Zip 33707

Country
Pinellas

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Wayne Pettit

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

6417 Gulfport Blvd S.

City

Pasadena

FL

Zip Code

33707

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May I
Added to Fees

10. OFFICERS AND DIRECTORS

NAME	D
NAME	Pettit, Wayne
STREET ADDRESS	6417 Gulfport Blvd S
CITY-STATE-ZIP	Pasadena, FL 33707
NAME	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne Pettit
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/07 727 385-6999
Date Uniform Phone #