

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000029478

1. Entity Name
OCEAN AIR CONDITIONING, HEATING, AND APPLIANCE SERVICE, INC.



Principal Place of Business
5712 W. WATERS AVE
STE 7
TAMPA FL 33634

Mailing Address
5712 W. WATERS AVE
STE 7
TAMPA FL 33634

FILED

03 JUL 14 PM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3460844

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

URREA, OSCAR
11701 BRANCH MORNING DR
TAMPA FL 33635

Name

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

City

FL

Zip Code

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 reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
URREA, OSCAR
6717 BENJAMIN ROAD, #328
TAMPA FL 33634 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300021588523
07/16/03--01024--026 **150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
VASQUEZ, DORA
6717 BENJAMIN ROAD, #328
TAMPA FL 33634 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
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☐ Change ☐ Addition

12. 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-5-03 - 813-3764181

Date Daytime Phone #

CR2E034 (4/03)

008048 AV

Attachment #P97000029478

OCEAN AIR CONDITIONING

HEATING AND APPLIANCE SERVICE INC

6717 Benjamin Road
Tampa, FL 33634

REFRIGERATION & MAJOR APPLIANCE REPAIR
License No. CAC053845

Office (813) 888-9295
Fax (813) 882-3392
Emergency (813) 266-2570

Florida Department of State Division Of Corporations
Division Of Corporation Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I would appreciate you waiving the late fee due to the fact that we had already sent the form and check since April 16. Once that was sent we assumed everything was fine and processing but now we have received a letter stating that this is still pending.

thank you

Ocean Air Conditioning

Registered agent - *Oscar D. Ureca* - 7-5-03

Oscar D. Ureca