


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

FILED

Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																
DOCUMENT # P97000030784 (7) 1. Corporation Name Komfort Industries, Inc.																																																																																																				
Principal Place of Business 2222 Second Street Fort Myers, FL 33901			Mailing Address 2222 Second Street Fort Myers, FL 33901																																																																																																	
2. Principal Place of Business 21 16071 Pinto Drive Suite, Apt. #, etc. 22 _____ City & State 23 North Fort Myers, FL Zip 24 33903 Country 25 USA		2a. Mailing Address 26 16071 Pinto Drive Suite, Apt. #, etc. 27 _____ City & State 28 North Fort Myers, FL Zip 29 33903 Country 30 USA		3. Date Incorporated or Qualified 04/01/1997 4. FEI Number 65-0742584 Applied For Not Applicable 5. Certificate of Status Desired N/A <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution N/A <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																
9. Name and Address of Current Registered Agent Jursinski, Kevin F. 2222 Second Street Fort Myers, FL 33901			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code																																																																																																	
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 N/A Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE																																																																																																				
12. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/> DELETE </td> </tr> <tr> <td></td> <td>Gano, William Kent Jr.</td> <td>64 Wolcott</td> <td>North Fort Myers, FL 33903</td> <td></td> </tr> <tr> <td></td> <td>Goodechild, Winton Joel</td> <td>64 Wolcott</td> <td>North Fort Myers, FL 33903</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE		Gano, William Kent Jr.	64 Wolcott	North Fort Myers, FL 33903			Goodechild, Winton Joel	64 Wolcott	North Fort Myers, FL 33903																																13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">1.1 TITLE</td> <td style="width: 40%;">1.2 NAME</td> <td style="width: 30%;">1.3 STREET ADDRESS</td> <td style="width: 10%;">1.4 CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>			1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																													
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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, on an attachment with an address.			SIGNATURE: William Kent Jr. Signature and typed or printed name of signing officer or director 4/21/98 941-997-1740 Date Daytime Phone #																																																																																																	

CR2E034 (10/97)