

FILE NOW: FILING FEE AFTER MAY 1ST IS \$55

FILED

Jun 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. [Redacted]
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000055328 (3)

1. Corporation Name
ENVIRONMENTAL AIR CONDITIONING INC.



Principal Place of Business

4826 NE 12TH AVE.
FT. LAUDERDALE FL 33334

Mailing Address

4826 NE 12TH AVE.
FT. LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 4826 NE 12 AVE
Suite, Apt. #, etc.

22

City & State

23 Oakland Park FL
Zip Country

24 33334

25 U.S.

2a. Mailing Address

26 Same
Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/23/1997

4. FEI Number

65-0807015

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

HUFF, THOMAS J SR.
8237 LINCOLN STREET
HOLLYWOOD FL 33024

10. Name and Address of New Registered Agent

81 Name

Glen A. HUFF

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

19244 cloister Lake Ln

83

84 City

Boca Raton FL

FL

85 Zip Code

33498

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), 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 provisions of, Section 607.05(5), Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when resigning)

DATE

3/15/98

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	HUFF, GLEN A	
STREET ADDRESS	5224 PRINCETON WAY	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE	VP	☐ DELETE
NAME	AGELOFF, DEBRA J	
STREET ADDRESS	5224 PRINCETON WAY	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	HUFF, GLEN A	
1.3 STREET ADDRESS	19244 cloister Lake Ln	
1.4 CITY-ST-ZIP	BOCA RATON FL 33498	
2.1 TITLE	Vice-Pres.	☒ Change ☐ Addition
2.2 NAME	AGELOFF, DEBRA J	
2.3 STREET ADDRESS	19244 cloister Lake Ln	
2.4 CITY-ST-ZIP	BOCA RATON FL 33498	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 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)(f), 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

[Signature]

3/12/98 19244 938-8997

CR2E034 (10/97)