~~CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 1998~~

AMENDED PROFIT CORPORATION ANNUAL REPORT 1998 $61.25

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 AUG 31 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000076467

1. Corporation Name
Lemerise Cooling + Heating, Inc.

Principal Place of Business: ~~8760~~

Mailing Address: 8760 Cocoa Court, Cape Canaveral, FL. 32920

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 8570 Commerce St	26 8760 Cocoa Court
Suite, Apt. #, etc 22 Suite #1	Suite, Apt. #, etc 27
City & State 23 Cape Canaveral, Fl.	City & State 28 Cape Canaveral, Fl.
Zip 24 32920 Country 25 Brevard	Zip 29 32920 Country 30 Brevard

3. Date Incorporated or Qualified: 9/02/97

4. FEI Number: 59-3467137 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $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

Aurelia A. Lemerise
8760 Cocoa Court
Cape Canaveral, Fl. 32920

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 ____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Aurelia A. Lemerise	1.2 NAME	
STREET ADDRESS	8760 Cocoa Ct., Cape Canaveral Fl.	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	Vice-President ADDITION	2.1 TITLE	☐ Change ☐ Addition
NAME	Henry A. Lemerise	2.2 NAME	700002630707--7
STREET ADDRESS	8760 Cocoa Ct.	2.3 STREET ADDRESS	-03/01/98--01087--001
CITY-ST-ZIP	Cape Canaveral	2.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	LFJ 8-31-98
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (5/98)

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, or on an attachment with an address.

SIGNATURE: Aurelia A. Lemerise, Pres. 8/28/98 (407) 784-5999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #