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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101163 (8)

ROBERT LEWIS AIR CONDITIONING/ FLORIDA ENERGY SE RVICES. INC.

Principal Place of Business

Mailing Address

FILED Jun 01 1998 8:00am Secretary of State



146 N.W. 64 CORAL SPRIM	WAY NGS FL 33071	146 N.W. 84 WAY CORAL SPRINGS FL 3307	M	DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE
				11/26/1997	
_ ^	lace of Business	2a. Mailing Address	~ 1.14.1	4. FEI Number	Applied For
21 (2	301 NW 5 Way	26 (2) (1) WW:	5 WAY		Not Applicable
Suite Frit.	Fe 3600	Suite, Apt. #, etc.	× '	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	· Lauderdole PC	28 FH. LYUK	RATE PC	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 3 3	3°09 25 USA		Country 30 USA	This corporation owes or has paid the operational Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
LE	MS, ROBERT		81 Name	Richard Spring	į
146 N.W. 84 WAY 82 Street Addi				Iress (P.O. Box Number is Not Acceptable)	
CO	PRAL SPRINGS FL 33071				
			83	MENDIGUREN & ASSOCIATES, P.A.	
			84 City	#301 NW 5TH WAY SUITE 3600_ FT LAUDERDALE, FL 33309	
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute Florida, Such change was a	es, the above-named cor uthorized by the corpora	reporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its societored
agent La	im familiar with, and accept the obligati	gns of, Section 607.0505, Flo	right statutes	Wa. lac	
SIGNATURE	Richard Signature typed to centro a name of repotence again	pring	Registered Agent signatured	ed when reinstating) DATE	
12.	OFFICERS AND				ND DIRECTORS IN 12
TITLE	8TPD	DELETE	13 TUTLE	ADDITIONS OF ANGLES TO OFFICE ITS A	Change Addition
		OLLET	1.2 NAME		Address only
NAME	LEWIS, ROBERT		1.2 NAME	12 NI NWSKWAY Suite	3400
STREET ADDRESS	146 N.W. 84 WAY		1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AS 2301 NW5H way Shift PT-LAUD SURFIL FL 333	2,6
CITY-ST-ZIP	CORAL SPRINGS FL 33071	DELETE	1.4 CiTY-ST-ZiP	1-1-LAUDYGRALL FL 77	Change Addition
TITLE		☐ DELETE	21 TITLE		Cutada Ca vontion
NAME					
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
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		
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		
w w					
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE NAME		DELETE			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS		DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Addition

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 surplemental 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 attack frient with an address.