

2007

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)****FILED**
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90028 028 ***150.00

DOCUMENT # P98000036162

1. Entity Name

Roehm Air Conditioning, Inc.

**DO NOT WRITE IN THIS SPACE**2. Principal Place of Business
695 Chapel Hill Blvd.3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Boynton Beach, FL

City & State

4. FEI Number
65-0836613Applied For
Not ApplicableZip
33435Country
Palm Beach

Zip

Country

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

CR2E034B (8/05)

**DO NOT WRITE
IN THIS SPACE****7. Name and Address of Current Registered Agent**Name
Henry Dean, C.P.A., P.A.

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

251 N.E. Dixie Blvd.

City
Delray Beach FL Zip Code
33444

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

January 1 - May 1 Fee is \$150.00**After May 1, Fee is \$550.00****Amended AR is \$61.25****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**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
Richard Roehm
695 Chapel Hill Blvd.
Boynton Beach, FL 33435TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard Roehm

4/27/07

561-732-2344