

FILED
Jun 19, 2007 8:00 am
Secretary of State

06-19-2007 90001 028 ***150.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT****DOCUMENT # P98000043566**

1. Entity Name

SOUTHERN AIR COMPRESSOR SERVICE, INC.



Principal Place of Business

1822 SUZANNE LANE
LAKELAND, FL 33813

Mailing Address

1822 SUZANNE LANE
LAKELAND, FL 33813

40121143



04232007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3528072

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

HACKER, JACK
1822 SUZANNE LANE
LAKELAND, FL 33813**DO NOT WRITE
IN THIS SPACE**

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HACKER, JACK
STREET ADDRESS	1822 SUZANNE LANE
CITY-ST-ZIP	LAKELAND, FL 33813
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack Hacker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/15/07

Date

(863) 533-7166

Daytime Phone #