PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90299 030 ***150.00

DOCUMENT # P98000047389

WEST AIR CONDITIONING MANAGEMENT, CORP.

| Principal Place of Business Mailing Address | | | | | | | | - | 1 4 100) 1 0600 (110) | |
|---|--|----------------|----------------------|------------|---|-------------|-------------|--|-------------------------------------|------------------------|
| 1855 WEST 62ND STREET 1855 WEST 62ND STRE | | | - | | | | | | | |
| #201 #201 | | | | | | | | | | |
| HIALEAH FL 33012 HIALEAH FL 33012 | | | | | | | | DO NOT WRITE IN THI | S SPACE | |
| | | | | | | | | 3. Date Incorporated or Qualifed 05/27/1998 | | |
| Principal Place of Business 2a. Mailing Address | | | | | | | | 4. FEI Number of 1/1/0 | Ap | plied For |
| 21 26 | | | | | · · · · · · · · · · · · · · · · · · · | | | 65-08 31777 | | t Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc | | | ite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | \$8.75 | 1 |
| 22 | | 27 | | | | | | | Fee Re | |
| City & State | 9 | City & State | | | | | | 6. Election Campaign Financing | \$5.00 | |
| 23 28 | | | - Country | | | | | Trust Fund Contribution | Added t | o Fees |
| Zip | Country Zip | | | Country | | | | 8. This corporation owes the current year li | ntangible ⊸ ☐ Yes | DIN _o |
| 24 | 25 | 29 | | 30 | | | | Personal Property Tax. 10. Name and Address of New Registered | | AINO |
| | 9. Name and Address of Curre | nt Registere | a Agent | | 81 | Name | | 10. Name and Address of New Registerer | Agent | _ |
| HER | NANDEZ, JORGE L | | | | • | Ivallie | , | | | |
| 1855 WEST 62ND STREET | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| #201 | | | | | 20 | | | | | |
| | <u>E</u> AH FL 33012 | | | • | 83 | | | | | } |
| HIAL | EAITTE 30012 | | | | 84 | City | | · · · · · · · · · · · · · · · · · · · | 85 Zip (| Code |
| | <u> </u> | | | | | | | | | |
| 11. Pursuant | to the provisions of Sections 607.050 | 02 and 607.1 | 508, Florida Statute | es, the al | bove I hv 1 | -named | d corpor | ration submits this statement for the purpose on's board of directors. I hereby accept the app | of changing its pintment as re | registered gistered |
| agent. I a | m familiar with, and accept the obliga | ations of, Sec | ction 607.0505, Flor | ida Statı | ites. | oo.p | | ,, | | ´ |
| SIGNATURE | | | | | | | | | | |
| | Signature, typed or printed name of registered age | | <u>`.</u> | | Agen | t signature | required t | when reinstating) DATE | ND DIDECTO | DO #140 |
| 12. | OFFICERS AF | ND DIRECT | | 13. | | | | ADDITIONS/CHANGES TO OFFICERS A | Change | Addition |
| TITLE | PSD DELETE | | | 1.1 TITLE | | | | ☐ Change | | |
| NAME | HERNANDEZ, JORGE L | | | 1.2 NA | | | | | | |
| STREET ADDRESS | 1855 WEST 62ND STREET | | | 1.3 ST | REET | ADDRESS | 3 | ~. | | 1 |
| CITY-ST-ZIP | HIALEAH FL 33012 | | | | TY-ST | -ZIP | <u> </u> | | 1 04 | - D Addition |
| TITLE | DELETE | | 2.1 ™ | 2.1 TMLE | | | | Change | Addition | |
| NAME | | | • | 2.2 NA | ME | | | | | |
| STREET ADDRESS | The second section is the second | | - | 2.3 ST | REET | ADDRESS | 3 | A L L L C | · - <u>-</u> | - |
| CITY-ST-ZIP | | | | 2.4 C | ΠY-\$ | T-ZIP | | | | |
| TITLE | | | ☐ DELETE | 3.1 TIT | ΓLE | | | | ☐ Change | ☐ Addition |
| NAME | | | | 3.2 NA | ME | | | | | |
| STREET ADDRESS | | | | 3.3 ST | REET | ADDRESS | 3 | | 475 | Ì |
| CITY-ST-ZIP | | | | 3.4. C | ITY-S | T-ZIP | | | _ | |
| TITLE | , | | | 4.1 TS | ΓLE | | | /**· | Change | Addition |
| NAME | | | | 4. 2 N | AME | | | Jan San San San San San San San San San S | | - |
| STREET ADDRESS | | | | 4.3 ST | REET | ADDRESS | 3 | · · | | |
| Crty-St-ZIP | | | | 4,4 CF | 1Y-S | -ZIP | | | | |
| TITLE | | | ☐ DELETE | 5.1 TT | TLE | | | | ☐ Change | ☐ Addition |
| NAME | | | | 5.2 N/ | ME | | | | | |
| STREET ADDRESS | • | | | 5.3 ST | REET | ADDRESS | 3 | | | |
| CITY-ST-ZiP . | | | | 5.4 CF | TY-ST | -ZIP | | | | |
| TITLE | | | ☐ DELETE | 6.1 711 | rlE. | | | | ☐ Change | ☐ Addition |
| NAME | | | = | 6.2 NA | ME | | | | | J |
| | | | | 63.57 | REET | ADDRESS | 3 \ | | | 1 |

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)(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, with all other like empowered.

6.4 CITY-ST-ZIP

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