

2004 FOR PROFIT CORPORATION ANNUAL REPORT

7/20/

FILED
Jul 29, 2004 8:00 am
Secretary of State

07-20-2004 90001 006 ***100.00

07-29-2004 90011 048 ****58.75

DOCUMENT # P99000085374 1. Entity Name TEWARI A/C MAINTENANCE & REPAIR, INC.					
Principal Place of Business 1870 TILLSTREAM DRIVE ORLANDO, FL 32818			Mailing Address 1870 TILLSTREAM DRIVE ORLANDO, FL 32818		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
TEWARI-ERROL G 1870 TILLSTREAM DRIVE ORLANDO, FL 32818			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEWARI, ERROL G 1870 TILLSTREAM DRIVE ORLANDO, FL 32818 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEWARI, MARCIA I 1870 TILLSTREAM DRIVE ORLANDO, FL 32818 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Errol G. Tewari</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			7/14/04 407 578-7431 Date Daytime Phone #		

44050352



07082004 Chg-P CR2E034 (10/03)

4. FEI Number
59-3600519

Applied For
Not Applicable

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

FL

Zip Code

Attachment

44050362

#P99000085374

July 15, 2004

**To: Division of Corporations
P.O. Box 6327
Tallahsee, FL 32314**

**From: Tewari A/C Maintenance &
Repair, Inc.
1870 Tillstream Drive
Orlando, FL 32818**

Attention: Reinstatement Department:

**I did not receive any notices for the year 2004. I would like the late fees
to be waived.**

Enclosed you will find a check for \$150.00.

Thank you for your attention in this matter.

Sincerely,

Errol G. Tewari

Errol G. Tewari