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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

BYRD ARCTIC AIRCONDITIONING, INC.									
Principal Place of Business		Mailing Address				T (BENEADLD FIN INDIA INDIA DIDIA DIDIA DIDIA	OL BIBLI BÍBLI A	HELL WEELL WIRTH	
6507 N. ROMI Tampa Fl 33		6507 N. ROME AVE TAMPA FL 33604			DO NOT WRITE	E IN THIS S	PACE		
			•			3. Date Incorporated or Qualified			
						02/04/1991			
2. Principal P	lace of Business	2a. Mailing Add	dress			4, FEI Number		Ap	plied For
21		26			59-3050756		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5, Certificate of Status Desired		\$8.75		
22		27			Si opiniodio di diales sconce		Fee Re	quired	
City & State	9	City & State			6. Election Campaign Financing	_	\$5.00		
Zip Country		Zip Country			Trust Fund Contribution		Added t		
24	25 29 30		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24	9. Name and Address of Current Registered Agent				10. Name and Address of New Re			1110	
PO				81	Name	10.	· - · · · ·	3	
ROLL, GERALD E. 6507 N. ROME AVE									
TAMPA FL 33604			82	Street Add	dress (P.O. Box Number is Not Accepta	pie)			
l in	WEA LE 33004			83					
				-	0:			11 -: .	
				84	City		FL	85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed harve of registered ag	ent and title 4 applicable	(NOTE: Rogi	istered Age	nt signature requ	uirad when reinslating)	DATE		
12.	OFFICERS AN	ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	S IN 12
TITLE	P		DELETE	1.1 TITLE				Change	☐ Addition
NAME	BYRD, RICHARD E.			1.2 NAME					
STREET ADDRESS	10018 N. 52ND STREET			13 STREET	ADDRESS				
CITY-ST-ZIP	TAMPA FL				T-ZIP				
TITLE	VT			2 1 TITLE			i	Change	☐ Addition
NAME	ROLL, GERALD E.			2.2 NAME	ł				
STREET ADDRESS	6507 N. ROME AVE.			2.3 STREET					
CITY-ST-ZIP TITLE	TAMPA FL 33604			2. 4 CITY - 5	11 - ZIP			Change	Addition
NAME	8 Daniel Scott	السا		3.1 TITLE 3.2 NAME	1				LI AUDIONI
STREET ADDRESS	3229 HUGHES ST			3.2 NAME 3.3 STREET	ADDRESS				
CITY-ST-ZIP	LAKELAND FL			3.4. CITY - S					
TITLE	DATE TO TE			4.1 TITLE	1-21			Change	Addition
NAME		_		4. 2 NAME	1				
STREET ADDRESS			1	4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY - S					
TITLE				5.1 TITLE				Change	Addition
NAME			. .	5.2 NAME	1				i
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP	·			5.4 CITY - S	T-ZIP				
TITLE			DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS			(6.3 STREET	AODRESS				
CITY-ST-ZIP				6.4 CHY-S	T - 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.

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