## FILE NOW: FILING FEE AFTER MAY 151 15 400 . U.J.

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jan 28 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS** 

(5)

JULIAN	io air conditioning inc	ORPORATED			
Principal Plac	e of Business	Mailing Address			HAN OLON BIEN BERF DION IDE
4324 KENILWORTH BLVD. SEBRING FL 33870 US		4324 KENILWORTH BLVD. SEBRING FL 33870 US		DO NOT WRITE IN THIS SPACE	
	•			3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a, Mailing Address		07/08/1991 4. FEI Number	A D F
21		26			Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3075159	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
<del></del>	g. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Register	ed Agent
JULIANO, DONALD E. 10020 MUSTANG TRAIL			81 Name		
			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	7
SEBRING FL 33872					
			83		
			84 City		85 Zip Code
				F	
11. Pursuant office or r agent. La	to the provisions of <b>S</b> ections 607.050 egistered agent, or <b>b</b> oth, in the State m familiar with, and accept the oblig	12 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	is, the above-named corp uthorized by the corporati rida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	e of changing its registered ppointment as registered
SIGNATURE					
12,	Signature, typed or printed name of registered age	O DIRECTORS (NOTE	Registered Agent signature require 13.		
TITLE	PVT	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	JULIANO, DONALD E.		12 NAME		Li Change Li Audition
STREET ADDRESS	10020 MUSTANG TRAIL		1.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		1.4 CITY-ST-ZIP		
TITLE	SDC	DELETE	2.1 TiTLE		Change Addition
NAME	JULIANO, DONALD E.		2.2 NAME		☐ change ☐ Addition
STREET ADDRESS	10020 MUSTANG TRAIL		2.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		2.4 CITY - ST-ZIP		
TITLE	M	OELETE	3.1 TIFLE		Change Addition
NAME	JULIANO, DONALD E.		3.2 NAME		
STREET ADDRESS	10020 MUSTANG TRAIL		3.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING FL		3.4. CITY-ST-ZIP		•
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	_		4.4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	_		5.4 CiTY - ST - ZiP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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.