


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 08, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000013439**

1. Entity Name  
**A-1 AIR & HEAT, INC.**



Principal Place of Business <b>19511 SW 216 STREET          MIAMI, FL 33170 US</b>	Mailing Address <b>19511 SW 216 STREET          MIAMI, FL 33171</b>
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**DO NOT WRITE IN THIS SPACE**



04052004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0644742</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**YOUNT, STEPHANIE  
 19511 SW 216 STREET  
 MIAMI, FL 33170**

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTS YOUNT, DORRANCE 19511 SW 216 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YOUNT, STEPHANIE KIM 19511 SW 216 ST MIAMI, FL
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U00000106347  
 04/08/04-80012-001 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** Stephanie Kim Yount 4-5-04 305-234-0805  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #