


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000052983
 1. Entity Name
 A.C. HEAT LOAD CENTRE, INC.



Principal Place of Business
 23205 FOUNTAIN VIEW #E
 BOCA RATON, FL 33433

Mailing Address
 23205 FOUNTAIN VIEW
 #E
 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE



04092007 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3677101	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SCHREIBER, FRANCES I
 23205 FOUNTAIN VIEW #E
 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

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 reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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	P SCHEIBER, FRANCES I 23205 FOUNTAIN VIEW #E BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHEREIBER, ANDRIES I 23205 FOUNTAIN VIEW #E BOCA RATON, FL 33433
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1000000701261
 04/20/07-80050-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: F. I. SCHREIBER **(561)**
 _____ **4/10/07** **367-8118**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #