2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000044915

FILED Mar 11, 2005 Secretary of State

Entity Name: TRINITY AIR CONDITIONING & REFRIGERATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9723 N NEW RIVER CANAL RD UNIT 417-B PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

4321 NW 56TH ST 4321 NW 56TH ST

FT LAUDERDALE, FL 33319 NORTH LAUDERDALE, FL 33319

FEI Number: 20-0860137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUEVARA, ENRIQUE LITVIN, BRUCE A 630 S S.R. 7 4321 NW 56 STREET

MARGATE, FL 33068 US NORTH LAUDERDALE, FL 33319 US

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.

SIGNATURE: BRUCE LITVIN 03/11/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

PLANTATION, FL 33324

City-St-Zip:

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 LITVIN, BRUCÉ A
 Name:

 Address:
 4321 NW 56 ST
 Address:

 City-St-Zip:
 FT LAUDERDALE, FL 33319
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: LAPUERTA, CARMEN B Name: MCKENZIE, FRANK N

Address: 4321 NW 56 ST Address: 9723 N NEW RIVER CANAL RD UNIT 417-B

City-St-Zip: FT LAUDERDALE, FL 33319 City-St-Zip: PLANTATION, FL 33324

Title: D (X) Delete Title: () Change () Addition

Name: MCKENIZE, FRANK N Name:
Address: 9723 N NEW RIVER CANAL RD UNIT 417-B Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: BRUCE LITVIN D 03/11/2005