

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 26, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90099 045 \*\*\*150.00

<b>DOCUMENT # 235070</b> 1. Entity Name <b>SUPERIOR HEATING-COOLING CORP.</b>					
Principal Place of Business <b>955 U. S. 41 BY PASS S VENICE, FL 34292</b>			Mailing Address <b>955 U. S. 41 BY PASS S VENICE, FL 34292</b>		
2. Principal Place of Business - No P.O. Box # <b>115 Triple Diamond Blvd.</b>		3. Mailing Address <b>115 Triple Diamond Blvd</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>North Venice, Florida</b>		City & State <b>North Venice, Florida</b>		4. FEI Number <b>59-0918985</b>	
Zip <b>34275-3632</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				03082007    Chg-P    CR2E034 (12/06)	
6. Name and Address of Current Registered Agent  <b>ARTZ, JACK 955 U. S. 41 BY PASS S VENICE, FL 34292</b>				7. Name and Address of New Registered Agent Name <b>Artz, Jack</b> Street Address (P.O. Box Number is Not Acceptable) <b>115 Triple Diamond Blvd</b> City <b>North Venice</b> <b>FL</b> Zip Code <b>34275-3632</b>	
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: <b>Spencer Artz</b> DATE: <b>3/9/07</b> <small>Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agent signature required when re-appointing)</small>					
<b>FILE NOW!!! FEE IS \$160.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST ARTZ, JACK 955 US 41 BY-PASS S. VENICE, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST Artz, Jack 115 Triple Diamond Blvd North Venice, FL 34275-3632	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VM DIEKER, EDWARD 955 US 41 BY-PASS S. VENICE, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VM Dieker, Edward 115 Triple Diamond Blvd North Venice, FL 34275-3632	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ARTZ, SPENCER 3164 ODESSA RD VENICE, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <b>Spencer Artz</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <b>3/7/07</b> <b>941-488-5359</b> <small>Daytime Phone #</small>		