

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001544

FILED
Mar 08, 2007
Secretary of State

Entity Name: FLORIDA COOLING SUPPLY, INC.

Current Principal Place of Business:

1954 CARROLL STREET
CLEARWATER, FL 33765

New Principal Place of Business:

19353 US 19 NORTH
SUITE 102
CLEARWATER, FL 33764

Current Mailing Address:

3200 WILCREST DRIVE
#440
HOUSTON, TX 77042

New Mailing Address:

FEI Number: 76-0495526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOOP, MICHAEL F
1954 CARROLL STREER
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

KNOOP, MICHAEL F
19353 US 19 NORTH
SUITE 102
CLEARWATER, FL 33764 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: _____

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TREVINO, ALEX JR
Address: 3200 WILCREST DR #440
City-St-Zip: HOUSTON, TX 770426039

Title: V () Delete
Name: MARESCA, ANTHONY R
Address: 3200 WILCREST DR #440
City-St-Zip: HOUSTON, TX 770426039

Title: P () Delete
Name: KNOOP, MICHAEL
Address: 1954 CARROLL STREET
City-St-Zip: CLEARWATER, FL 33765

Title: VP () Delete
Name: TREVINO, STEVE
Address: 4655 WRIGHT RD.
City-St-Zip: STAFFORD, TX 77477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MARESCA, ANTHONY R
Address: 3200 WILCREST DR #440
City-St-Zip: HOUSTON, TX 770426039

Title: P (X) Change () Addition
Name: KNOOP, MICHAEL
Address: 19353 US 19 NORTH, SUITE 102
City-St-Zip: CLEARWATER, FL 33764

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: STEVE TREVINO

VP

03/08/2007

Electronic Signature of Signing Officer or Director

Date