

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L22786

FILED
Jun 26, 2009
Secretary of State

Entity Name: REGAL AIR CONDITIONING AND HEATING, INC.

Current Principal Place of Business:

2908 FIELDCREST CT
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

% CARLOS GONZALEZ
4614 CALENDULA DR
ORLANDO, FL 328393117

New Mailing Address:

FEI Number: 59-2974242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, CARLOS
4614 CALENDULA DR
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: IGLESIAS, TOMAS
Address: 2908 FIELDCREST COURT
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: IGLESIAS, GLADYS
Address: 2908 FIELDCREST COURT
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: TOMAS IGLESIAS

D

06/26/2009

Electronic Signature of Signing Officer or Director

_____ Date