

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L76928

FILED
Apr 06, 2006
Secretary of State

Entity Name: DAVE MASTRO AIR & HEAT, INC.

Current Principal Place of Business:

401 GLENWOOD AVE
SATELLITE BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

401 GLENWOOD AVE
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 59-3012209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTROLONARDO, LUCILLE
401 GLENWOOD AVE
SATELLITE BEACH, FL 32937 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: MASTROLONARDO, DAVID,
Address: 401 GLENWOOD AVE
City-St-Zip: SATELLITE BCH, FL

Title: DTS () Delete
Name: MASTROLONARDO, LUCIL, LE
Address: 401 GLENWOOD AVE
City-St-Zip: SATELLITE BCH, FL

Title: D () Delete
Name: BLAIR, JOEL W
Address: 1373 FARGO DRIVE
City-St-Zip: MELBOURNE, FL 32940 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPC (X) Change () Addition
Name: MASTROLONARDO, DAVID,
Address: 401 GLENWOOD AVE
City-St-Zip: SATELLITE BCH, FL 32937 US

Title: DTS (X) Change () Addition
Name: MASTROLONARDO, LUCIL, LE
Address: 401 GLENWOOD AVE
City-St-Zip: SATELLITE BCH, FL 32937 US

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: LUCILLE MASTROLONARDO

DTS

04/06/2006

Electronic Signature of Signing Officer or Director

Date