

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000027617

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** A ACCURATE AIR CONDITIONING & HEATING SYSTEMS INC

**Current Principal Place of Business:**

2430 E. SEMORAN BLVD.  
SUITE 54  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 445  
SORRENTO, FL 32776

**New Mailing Address:**

**FEI Number:** 59-3468840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZARRELLI, ANTHONY  
2430 E. SEMORAN BLVD.  
SUITE 54  
APOPKA, FL 32703 US

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

ZARRELLI, ANTHONY JR  
2430 E. SEMORAN BLVD.  
SUITE 54  
APOPKA, FL 32703 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: ANTHONY ZARRELLI JR

04/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ZARRELLI, ANTHONY JR  
Address: 2430 E. SEMORAN BLVD. #54  
City-St-Zip: APOPKA, FL 32703

Title: VP  
Name: ZARRELLI, ANTHONY  
Address: 2430 E. SEMORAN BLVD. #54  
City-St-Zip: APOPKA, FL 32703

Title: T  
Name: ZARRELLI, ANTHONY JR  
Address: 2430 E. SEMORAN BLVD. #54  
City-St-Zip: APOPKA, FL 32703

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY ZARRELLI JR

PRES

04/01/2011

Electronic Signature of Signing Officer or Director

Date