

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094703

FILED
Apr 17, 2009
Secretary of State

Entity Name: BELOW ZERO AIR CONDITIONING INC.

Current Principal Place of Business:

8600 NW 64 ST
SUITE # 8
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8600 NW 64 ST
SUITE # 8
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-1143930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE HOWARTZ, GUILLERMO
1825 PONCE DE LEON BL STE 380
CORAL GABLES, FL 33134 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: D () Delete
Name: BARRIOS, JORGE
Address: 13040 SW 81 ST
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: COSCHIGNANO, ANTHONY
Address: 4444 CRISTAL LAKES DRIVE
City-St-Zip: DEERFIELD, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: COSCHIGNANO, ANTHONY
Address: 4444 CRISTAL LAKES DRIVE
City-St-Zip: DEERFIELD, FL 33442

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: ANTHONY COSCHIGNANO

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04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date