


2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000023107	
1. Entity Name ACCURATE AIR CONDITIONING, HEATING, AND REFRIGERATION, INC.	

Principal Place of Business 450 DISTRIBUTION DR. SUITE PMB # 125 MELBOURNE, FL 32904	Mailing Address PO BOX 320624 COCOA BEACH, FL 32932
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2. Principal Place of Business, No P.O. Box # 450 Distribution Dr	3. Mailing Address P.O. Box 320624
Suite, Apt. #, etc. SUITE P.M.B. 125	Suite, Apt. #, etc.
City & State Melbourne FL	City & State Cocoa Bch FL
Zip 32904	Country Brevard
Country 32932	Country U.S.A

FILED
09 OCT 26 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07132009 REIN-P CR2E098 (1/07)

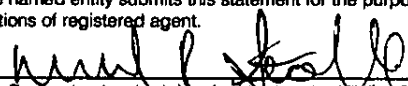
4. FEI Number
37-1464622

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STOLL, MICHAEL R 450 DISTRIBUTION DR. SUITE PMB 125 MELBOURNE, FL 32904

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **8/12/09**

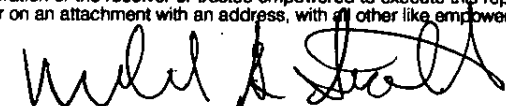
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

 **8/12/09**