

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000112065

**FILED**  
**Mar 17, 2010**  
**Secretary of State**

**Entity Name:** INDEPENDENT AIR CONDITIONING INC

**Current Principal Place of Business:**

1412 PINETREE CIRCLE  
WIMAUMA, FL 33598

**New Principal Place of Business:**

700 S. FLORIDA AVE.  
#505  
TAMPA, FL 33602

**Current Mailing Address:**

PO BOX 5124  
SUN CITY CENTER, FL 33571

**New Mailing Address:**

700 S. FLORIDA AVE.  
#505  
TAMPA, FL 33602

**FEI Number:** 20-0293269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LETO, PETER P  
1412 PINETREE CIRCLE  
WIMAUMA, FL 33598 US

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

LETO, PETER P  
700 S. FLORIDA AVE.  
#505  
TAMPA, FL 33602 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: PETER P. LETO

03/17/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LETO, PETER P  
Address: PO BOX 5124  
City-St-Zip: SUN CITY CENTER, FL 33571

Title: V  
Name: LETO, PETER J  
Address: 700 S. FLORIDA AVE. #505  
City-St-Zip: TAMPA, FL 33602

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: PETER J. LETO

V

03/17/2010

Electronic Signature of Signing Officer or Director

Date