

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90181 018 ***150.00

DOCUMENT # P03000121806 1. Entity Name EXPRESS COOLING & HEATING INC.			
Principal Place of Business 10358 NW 127TH ST HIALEAH GARDENS, FL 33018		Mailing Address 10358 NW 127TH ST HIALEAH GARDENS, FL 33018	
2. Principal Place of Business 18192 SW 33RD ST Suite, Apt. #, etc.		3. Mailing Address 18192 SW 33RD ST Suite, Apt. #, etc.	
City & State MIRAMAR, FLORIDA Zip 33029		City & State MIRAMAR Zip 33029	
Country BROWARD		Country BROWARD	
4. FEI Number 75-3136892		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEREZ, FLORENTINO 10358 NW 127TH ST HIALEAH GARDENS, FL 33018		7. Name and Address of New Registered Agent Name FLORENTINO PEREZ Street Address (P.O. Box Number is Not Acceptable) 18192 SW 33RD ST City MIRAMAR FL Zip Code 33029	
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: <u><i>Florentino Perez</i></u> (NOTE: Registered Agent signature required when reinstating) DATE: <u>4/25/06</u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEREZ, FLORENTINO 10358 NW 127TH ST HIALEAH GARDENS, FL 33018	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	18192 SW 33RD ST MIRAMAR, FL 33029	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	- - -	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	- - -	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Florentino Perez</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>4/25/06</u> <u>305-9789382</u> Date Daytime Phone #	