## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000128092

FILED Sep 15, 2008 Secretary of State

Entity Name: CLH AIR CONDITIONING,	INC.	
Current Principal Place of Business:	New Principal Place	of Business:
1149 SW 47TH TER. CAPE CORAL, FL 33914 US		
Current Mailing Address:	New Mailing Address	<b>s:</b>
1149 SW 47 TERRACE CAPE CORAL, FL 33914		
FEI Number: 52-2419604 FEI Number Appl	lied For ( ) FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Register	ed Agent: Name and Address o	f New Registered Agent:
ANTONE, MICHAEL 1149 SW 47 TERRACE CAPE CORAL, FL 33914 US		
The above named entity submits this state in the State of Florida.	ment for the purpose of changing its registered	d office or registered agent, or both,
SIGNATURE:		
Electronic Signature of Ro	egistered Agent	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS:
Title: PD ( ) Delete Name: ANTONE, MICHAEL Address: 1149 SW 47 TERRACE	Title: Name: Address:	( ) Change ( ) Addition

City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip:

() Delete Title: (X) Change ( ) Addition

ANTONE, ROBIN J ANTONE, MICHAEL J Name: Name: Address: 1149 SW 47 TER. Address: 1149 SW 47 TER. City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914

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: MICHAEL ANTONE PD 09/15/2008