2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000141584

Title:

Name:

Address:

City-St-Zip:

(X) Delete

VIOLA, JOSEPH P MANAGER

GULF BREEZE, FL 32563 US

5040 KEYSTONE DR.

MANA

ame: BREEZE AIR CONDITIONING & HEATING IN

FILED Jun 01, 2006 Secretary of State

| Entity Name: BREEZE AIR CONDITIONING & HEATING, INC | | | | | |
|---|--------------------------|---------------------------------|---|--|--|
| Current Pr | incipal Place | of Business: | New Principal Place of Business: | | |
| 5040 KEYS GULF BRE | TONE DR. EZE, FL 3256 | 33 | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 5040 KEYS GULF BRE | TONE DR. EZE, FL 3256 | 63 | | | |
| FEI Number: | 83-0379971 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| 5040 KEYS GULF BRE | EZE, FL 3256 | 33 US | ourpose of changing its register | ed office or registered agent, or both, | |
| SIGNATUR | | | | | |
| | | iic Signature of Registered Age | ent | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | • • | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | ` ' | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ELIZABRTH G. LINGERFELT SECR 06/01/2006

() Change () Addition