2006 FOR PROFIT CORPORATION

FILED Apr 26, 2006 08:00 AM

ANNUAL REPORT				Secretary of State		
1. Entity Nam ALL SEA	MENT # P040003139 SONS HEATING - A/C & ELEC ICTOR, INC.					y or state
2621 E 401	нст	Mailing Address 2621 E 40TH CT PANAMA CITY, FL 32405		E FOOTBREEF !	1 88 811 8 1881 88 113 88 111 88 11	R SERGEN (KREI (HERE HIKRE SERGE AKHERE AK
D	OO NOT WRITE I		CE	01102008 4. FEI Numb 59-318	No Chg-P	CR2E034 (11/05) Applied For Not Applied: \$8.75 Additional Fee Required
BEACH, W 2621 E 40 PANAMA				NOT W THIS SP		
5. The above the obligat	named entity submits this statement for the ions of registered agent. Signature, typed or printed name of registered agent and the) ed office or register ed Agent signature required		oth, in the State of Flo	rida. 1 am familiar with, end accep
FILE NOWIS FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10. INTE NAME STREET ADDRESS GITY-ST-ZEP THLE NAME STREET ADDRESS CHY-ST-ZEP TITLE NAME STREET ADDRESS CHY-ST-ZEP TITLE NAME STREET ADDRESS CHY-ST-ZEP TITLE NAME STREET ADDRESS CHY-ST-ZEP	P BEACH, WAYNE 2821 E 40TH CT PANAMA CITY, FL 32405 VP BEACH, ADAM 2821 E 40TH CT PANAMA CITY, FL 32405 VP BEACH, LUKE 2821 E 40TH CT PANAMA CITY, FL 32405 VP BEACH, LUKE 2821 E 40TH CT PANAMA CITY, FL 32405 VP HALL, JOE 2621 E 40TH CT PANAMA CITY, FL 32405	CTORS			U00000 05/08/06- NOT W THIS SP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. Thereby certify that the information supplied with this filing does not quality 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 affect as if made under path; 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:

BTLE NAME STREET ADDRESS CUY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-24-06 Date

850 | 527-0535 Daystime Phone 8