2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000163745

THERMAL EQUIPMENT SOLUTIONS INC.



Principal Place of Business

14365 E COLONIAL DR STE B-3 ORLANDO, FL 32826

Mailing Address

14365 E COLONIAL DR STE B-3 ORLANDO, FL 32826

FILED Jul 14, 2008 08:00 AM Secretary of State



07102008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-4017839 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

WEIR, RANDALL P 17117 DRAWDY COURT ORLANDO, FL 32820

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|--|---|--|----------|--|--|---|------------|
| 8. The above the obliga | e named entity submits this statement for the ptions of registered agent. Signalure, typed or printed name of registered agent and title | | • • • | gistered agent, or bo | | I am familiar with, and ac | cept |
| *1 " | LE NOW!!! FEE IS \$150.00 ue by September 12, 2008 | Election Campaign Finan Trust Fund Contribution. | cing · 🗖 | \$5.00 May Be Added to Fees | In accordance with corporation did not | s. 607.193(2)(b), F.S., the prior notice. | he . |
| III.E NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | OFFICERS AND DIRECT PT WEIR, RANDALL 17117 DRAWDY COURT ORLANDO, FL 32820 VS WILLIAMS, ROBERT D 761 NORTH BELFAST CHULUOTA, FL 32766 | CTORS | | | U0000095 U7/14/08-80 | 4705 012-019 150 00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | | The Control of the Co | THIS SPA | | |

12. I nereby 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR