

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000082336

FILED  
Apr 04, 2008  
Secretary of State

Entity Name: P & G COOLING & HEATING INC.

**Current Principal Place of Business:**

8019 W ELM STREET  
TAMPA, FL 33615 US

**New Principal Place of Business:**

**Current Mailing Address:**

8019 W ELM STREET  
TAMPA, FL 33615 US

**New Mailing Address:**

FEI Number: 26-0562476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GONZALEZ, RENE  
8019 W ELM STREET  
TAMPA, FL, FL 33615 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GONZALEZ, RENE  
Address: 8019 W ELM STREET  
City-St-Zip: TAMPA, FL 33615 US

Title: VP ( ) Delete  
Name: PAULINO, ANDRES  
Address: 7602 LINEBURY AVE  
City-St-Zip: TAMPA, FL 33625 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RENE GONZALEZ

P

04/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date