


2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED

08 DEC 31 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P07000088947 1. Entity Name AC GUYS MECHANICAL HEATING AND COOLING, INC	
--	---

Principal Place of Business 4825 BARNSTEAD DR RIVERVIEW, FL 33569 US	Mailing Address 4825 BARNSTEAD DR RIVERVIEW, FL 33569 US
--	--

2. Principal Place of Business - No P.O. Box # 1503 Portsmouth LAKE DR Suite, Apt. #, etc.	3. Mailing Address 1503 Portsmouth LAKE DR Suite, Apt. #, etc.
---	---

City & State BRANDON, FL.	City & State BRANDON, FL.
Zip 33511	Zip 33511
Country U.S.	Country U.S.



4. FEI Number 26-0673515		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent HSIEH, ANDY C 4825 BARNSTEAD DR RIVERVIEW, FL 33569		
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1503 PORTSMOUTH LAKE DR City BRANDON FL Zip Code 33511		

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE: Andy Hsieh Andy Hsieh president 12/23/08
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HSIEH, ANDY C 4825 BARNSTEAD DR RIVERVIEW, FL 33569	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1503 PORTSMOUTH LAKE DR BRANDON, FL. 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700139394457 12/31/08--01040--006 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition cc 1/9

12. I hereby 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: Andy Hsieh Andy Hsieh president 12/23/08 (813) 250-2173
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #