

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000063261

FILED
Apr 15, 2009
Secretary of State

Entity Name: ADVANCED TEMPERATURE TECHNICIANS INC.

Current Principal Place of Business:

300 PINE ISLAND ROAD
SUITE 218
FORT LAUDERDALE, FL 33324 US

Current Mailing Address:

300 PINE ISLAND ROAD
SUITE 218
FORT LAUDERDALE, FL 33324 US

New Principal Place of Business:

300 PINE ISLAND ROAD
SUITE NO. 218
FORT LAUDERDALE, FL 33324 US

New Mailing Address:

300 PINE ISLAND ROAD
SUITE NO. 218
FORT LAUDERDALE, FL 33324 US

FEI Number: 65-0512119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARNESON, RICKY A.
13840 APPLALICHIAN TRAIL
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

ARNESON, RICKY A.
13840 APPLALICHIAN TRAIL
DAVIE, FL 33325 US

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: RICKY A. ARNESON

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ARENSON, RICKY A.
Address: 13840 APPALACHIAN TRAIL
City-St-Zip: DAVIE, FL 323251211

Title: VPST () Delete
Name: ARNESON, MARGARET
Address: 13840 APPALACHIAN TRAIL
City-St-Zip: DAVIE, FL

Title: D (X) Delete
Name: ARNESON, MARGARET
Address: 13840 APPALACHIAN TRL
City-St-Zip: DAVIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ARENSON, RICKY A
Address: 13840 APPALACHIAN TRAIL
City-St-Zip: DAVIE, FL 323251211

Title: DVST (X) Change () Addition
Name: ARNESON, MARGARET S
Address: 13840 APPALACHIAN TRAIL
City-St-Zip: DAVIE, FL

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: RICKY A. ARNESON

DP

04/15/2009

Electronic Signature of Signing Officer or Director

Date