2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL

Apr 13, 2006 8:00 am Secretary of State DOCUMENT # P94000065691 1. Entity Name 04-13-2006 90287 006 ***150.00 AIR & HEAT, INC. Principal Place of Business Mailing Address 502 36TH STREET, WEST 502 36TH STREET, WEST BRADENTON FL 34205 **BRADENTON FL 34205** 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 65-0650316 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAKER, DANIEL A Street Address (P.O. Box Number is Not Acceptable) 1410 35TH STREET WEST **BRADENTON FL 34205** Zip Code 8. The above named entity submits this s int 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 Signature, typed or printed name of re and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. **OFFICERS** AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 HILE DPS ☐ Delete TITLE ☐ Addition NAME NAME BAKER, DANIEL A Daniel BAKER STREET ADDRESS STREET ADDRESS 1410 35TH STREET WEST too) may bolin Da CITY-ST-ZIP **BRADENTON FL 34208** CITY-ST-ZIP DN+ TITLE ☐ Delete NAME BROWN, ROBERT J Brown Robert) STREET ADDRESS 5129 OAKLAND HILL AVE. STREET ADDRESS 6334 Pine mucous WAV CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34234 Addition TITLE ☐ Detete THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP for the exemptions contained in Section 119, Florida Statutes. I further certify that the information by signature shall have the same legal effect as it made under oath; that I am an officer or director that I am an officer or director that required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 12. I hereby certify that the information supplied with this filling open he indicated on this report or supplemental report is true and accur of the corporation or the receiver or trustee empowered to exact if changed, or on an attachment with an address, with all other

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