2005 FOR PROFIT CORPORATION

ANNUAL REPORT (AR)							FILED				
1. Entity Nam						. (Mary	64/2095 recary	/08:0 of St	00 AM ate	
ن.	S AIR CONDITION	NG, INC.	The second below with 1600 to				7/	50			
Principal Plac	e of Business	Mailing Ad	dress	A CALL	Part Make				Axia a		
12427 FLÖR TAMPA FL	RÌDA AVE	12427 FL TAMPA F	ORIDA AVE L 33612	ent and an	The state of the s	1.00			Est ilsis ilset lis	, , , , , , , , , , , , , , , , , , ,	
2. Principal F	lace of Business	3. Mailing A	Address			_	alibut 1 42 ilisi a liti baire i	IMIII MMIII MMIIM MIIII ME	INI SINIM SINAT III		
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			1st MOORE CR2E034 (10/04)					
City & Star	e	City & Sta	City & State			4. FEI Numb	^{per} 59-33302	74	├	plied For Applicable	
Zip	Zip Country		Zip Ci		y	5. Certificat	e of Status Desire		8.75 Add ee Required		
•	6. Name and Address	of Current Registered Ag	ent		Name	7. Name an	d Address of Nev	v Registered Aç	ent		
124	LER, AUSTIN E 27 FLORIDA AVE					ddress (P.O. Box Number is Not Acceptable)					
IAN	//PA FL 33612										
	•				City			FL	Zip Code	,	
	named entity submits this tions of registered agent.	statement for the purpose of	of changing its i	registered	l office or regist	ered agent, or b	oth, in the State of	Florida. I am fa	miliar with,	and accept	
SIGNATURE	Signature, typed or printed name of o	egistered agent and tille if applicable	(NOTE	Registered	geni signatuse sequi	ed when telustating)	<u></u>	DATE			
After	ILE NOW!!! FEE IS \$ May 1, 2005 Fee Will E Payable to Florida Dep	le \$550.00					9. Election Car Trust Fund C	npaign Financin Contribution. [00 May Be ed to Fees	
10.	The second secon	CERS AND DIRECTORS	· · · · · · · · · · · · · · · · · · ·	11.		ADDITIONS	/CHANGES TO C	FFICERS AND [DIRECTORS	\$ IN 11	
TITLE NAME STREET ADDRESS	PS — BUTLER, AUSTIN E 12427 FLORIDA AVE		□ Delete _		ADDRESC:		U00000 03/30/0 5 -6	281U25	□ Change 158.7	☐ Addition	
CITY-ST-ZIP	TAMPA FL 33612 EVP	· · · · · · · · · · · · · · · · · · ·		CHY-S	11-71F					Addition	
TITLE NAME	BUTLER, LAURA		Delete	TITLE				•	Onange		
STREET ADDRESS CITY-ST-ZIP	12427 FLORIDA AVE TAMPA FL 33612	·		STREET CITY S	ADDRESS 1 - ZIP						
TITLE	VP		Delete	TITLE NAME	İ			I	☐ Change	Addition	
NAME STREET ADDRESS	SMITH, DONALD 12427 FLORIDA AVE.			NAME STREET	ADORESS					-	
CHY-ST-ZIP	TAMPA FL 33612	· · · · · · · · · · · · · · · · · · ·		CITY-S	7 7IP			·			
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STREET ADDRESS CITY-ST-ZIP				STREET CITY-S	ADDRESS T-ZIP				_		
TITLE			☐ Delete	TITLE			·		Change	☐ Addition	
NAME STREET ADDRESS					ADDRESS					ļ	
CITY ST -71P				CHTY-S	7 - <u>Z</u> (P						
title Name			☐ Delete	HILLE					Change	Addition	
STREET ADDRESS	_			STREET	ADDRESS						
CITY-ST-ZIP	certify that the information s	unnlied with this filing does	not qualify for	CITY-S		Section 119 07/2	Vi) Florida Statute	es I further certif	v that the ir	formation	
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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 trystee 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: