

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000065570

FILED
Mar 08, 2004
Secretary of State

Entity Name: ALL TEMP REFRIGERATION & AC, INC.

Current Principal Place of Business:

6185 PLAINS DRIVE
LAKE WORTH, FL 334631510 US

New Principal Place of Business:

17419 35TH PLACE N.
LOXAHATCHEE, FL 334703699 US

Current Mailing Address:

6185 PLAINS DRIVE
LAKE WORTH, FL 334631510 US

New Mailing Address:

17419 35TH PLACE N.
LOXAHATCHEE, FL 334703699 US

FEI Number: 65-0685212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INTAGLIATA, FELIX
6185 PLAINS DRIVE
GREEN ACRES, FL 334631510

Name and Address of New Registered Agent:

INTAGLIATA, FELIX
17419 35TH PLACE N.
LOXAHATCHEE, FL 334703699 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:

03/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: INTAGLIATA, FELIX
Address: 6185 PLAINS DRIVE
City-St-Zip: GREEN ACRES, FL 334631510

Title: TS () Delete
Name: INTAGLIATA, MARIA
Address: 6185 PLAINS DRIVE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: INTAGLIATA, FELIX
Address: 17419 35TH PLACE N.
City-St-Zip: LOXAHATCHEE, FL 334703699 US

Title: TS (X) Change () Addition
Name: INTAGLIATA, MARIA
Address: 17419 35TH PLACE N.
City-St-Zip: LOXAHATCHEE, FL 334703699 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FELIX INTAGLIATA

PRES

03/08/2004

Electronic Signature of Signing Officer or Director

Date