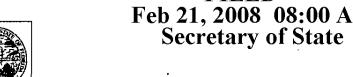
2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # S10535 1. Entity Name A-B-C AIR CONDITIONING, INC.





Principal Place of Business 1999 GEORGIANNA ST.

LARGO, FL 34644

Mailing Address

1999 GEORGIANNA ST. LARGO, FL 34644



DO NOT WRITE IN THIS SPACE

No Chg-P 02042008 CR2E034 (11/05)

4. FEI Number Applied For 59-3036999 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

FILED

6. Name and Address of Current Registered Agent

KIRKLAND, BRIAN 1999 GEORGIANNA ST. LARGO, FL 34644

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstation)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

UG00000822792 02/28/08-80025-025 150.00

10. OFFICERS AND DIRECTORS PRES TITLE KIRKLAND, BRIAN NAME STREET ADDRESS 1999 GEORGIANNA ST. CITY-ST-ZIP LARGO, FL 33774 SEC TITLE KIRKLAND, MARCELLE NAME STREET ADDRESS 1999 GEORGIANNA ST. CHY-ST-ZIP LARGO, FL 33774 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR