## 2007 FOR PROFIT CORPORATION ANNUAL REPORT .

SIGNATURE: **(** 

## FILED Mar 12, 2007 08:00 AM Secretary of State

ANNUAL REPORT ,				Mar 12, 200 / 08:00	
1. Entity Nam	MENT # V61734 DL A/C & HEATING, INC.			Se	ecretary of Sta
Principal Plac	ce of Business	Mailing Address			
6495 BOCA	CIRCLE N, FL 33433	6495 BOCA CIRCLE BOCA RATON, FL 33433			
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				02282007 No Chg-P	CR2E034 (11/05)
·	O NOT WRITE	IN THIS SPA	CE	4. FEI Number	Applied For
			Market Market	65-0355963	Not Applicable  \$8.75 Additional
			-	5. Certificate of Status Desired	Fee Required
	6. Name and Address of Current Re	gistered Agent		See The Control of th	and the second of the second o
SILVERS, MARK D. 6495 BOCA CIRCLE			100	DO NOT WE	RITE
BOCA RATON, FL 33433				IN THIS SPA	ICE.
				A Line of the Contract of the	the state of the s
. The above	named entity submits this statement for the	ne purpose of changing its registe	red office or register	red agent, or both, in the State of Floric	a. I am familiar with, and accept
the obligat	tions of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Register	red Agent signature required	I when reinstating)	DATE
FIL	E NOW!!! FEE IS \$150.00	9. Election Campaign Fina	ancing \$5.	.00 May Be	
After M	ay 1, 2007 Fee will be \$550.00	_1	i. 🗆 Addi	ed to Fees	
ITLE	OFFICERS AND DI	RECTORS		A GO CONTRACTOR OF THE PARTY OF	to the registration of the control o
AME	SILVERS, MARK D.		· · · · · · · · · · · · ·		
TREET ADDRESS HTY-ST-ZIP	8495 BOCA CIRCLE BOCA RATON, FL 33933			100	The transfer of the state of th
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2. I hereby o	certify that the information supplied with the	is filling does not qualify for the ex	emptions contained	in Chapter 119, Florida Statutes. I fur	the captify that the information
indicated of the con	pertry that the information supplied with the on this report or supplemental report is tru- poration or the receiver or trustee empower or on an attachment with an address, with	is mind does not qualify for the ex se and accurate and that my signs ared to execute this report as requ	temptions contained sture shall have the s ired by Chapter 607	rm Unapter 119, Horida Statutes. I fur same legal effect as if made under oat Florida Statutes; and that my name a	ther certify that the information n; that I am an officer or director ppears in Block 10 or Block 11 if

G OFFICER OR DIRECTOR