## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000002160

City-St-Zip:

Entity Name: A.B.C. REFRIGERATION AND AIR CONDITIONING, INC

FILED Jun 27, 2006 Secretary of State

Littly Nai	ile. A.D.C. RE	I RIGERATION AND AIR CON		ING, INC.				
Current Principal Place of Business:				New Principal Place of Business:				
	ORY AVENUE E, NY 13208			6619 JOY F SYRACUS	RD. E, NY 1305	7		
Current Mailing Address:				New Mailing Address:				
110 FACTORY AVENUE SYRACUSE, NY 13208				6619 JOY RD. SYRACUSE, NY 13057				
FEI Number:	16-0952613	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ( )	Certific	ate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
	V & COMPANY DALE MABRY S _ 33618 US	SUITE 270						
	named entity s of Florida.	ubmits this statement for the p	urpose o	f changing i	ts registered	office or	registered agent, or both,	
SIGNATUF	RE:							
	Electron	ic Signature of Registered Age	nt				Date	
		3(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	t receive tl	he prior notic	e.			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () LIGOCI, CARME 110 FACTORY A SYRACUSE, NY	AVENUE		Title: Name: Address: City-St-Zip:	P LIGOCI, CAR 6619 JOY RI SYRACUSE,	MEN D.	( ) Addition	
Title: Name: Address: City-St-Zip:	ST () CHIRICO, MELI 110 FACTORY A SYRACUSE, NY	AVENUE		Title: Name: Address: City-St-Zip:	ST CHIRICO, ME 6619 JOY RE SYRACUSE,	ELÍSSA ).	( ) Addition	
Title: Name:	( )	Delete		Title: Name:	VP LIGOCI, JOS	EPH	(X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

City-St-Zip: SYRACUSE, NY 13057

SIGNATURE: CARMEN D. LIGOCI PRES 06/27/2006