Jan 29, 2001 8:00 am Secretary of State 01-29-2001 90193 029 ***150.00

FILED

್ವಾ2001 UNIFO	DRM BUSINESS	REPORT (UBR

DOCUMENT # F0000000198

Entity Name

INDUSTRIAL REFRIGERATION, INC.

Principal Place of Business

Mailing Address

514 MT. PLEASANT ROAD HAMPTON GA 30228-1803

SIGNATURE

514 MT. PLEASANT ROAD HAMPTON GA 30228-1803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

DATE

		1 .							
City & State		City & State	City & State		4.	FEI Number 58-2452881	$\neg \top$	Applied For	
					ļ			Not Applicable	
Zip	Country	Zip	Country		5.	Certificate of Status Desired	8.75 ee Re	3.75 Additional e Required	
6. Name and Address of Current Registered Agent			7.	Name and Address of New Registered Agent					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Name				_			
			Street Address (P.O. Box Number is Not Acceptable)						
				City	-	FL	Zip	Code	

(NOTE: Registered Agent signature required when reinstating)

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.

This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.

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

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

(See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE ☐ Change Addition **BROWN, REX** NAME NAME STREET ADDRESS 514 MT. PLEASANT ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HAMPTON GA 30228 **DPST** ☐ Addition TITLE ☐ Delete TITLE ☐ Change CHILDERS, TERRY R NAME NAME STREET ADDRESS STREET ADDRESS 514 MT. PLEASANT ROAD CITY-ST-ZIP CITY-ST-ZIP HAMPTON GA 30228-1803 ☐ Change TITLE Delete TITLE ☐ Addition MATHEWS, FORBES H NAME NAME STREET ADDRESS STREET ADDRESS 514 MT. PLEASANT ROAD CITY-ST-7IP CITY-ST-ZIP HAMPTON GA 30228-1803 ☐ Addition TITLE ☐ Delete TITLE ☐ Change GOOSEFF, ALEX P NAME NAME STREET ADDRESS STREET ADDRESS 514 MT. PLEASANT ROAD CITY-ST-ZIP CITY-ST-ZIP HAMPTON GA 30228-1803 TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I. hereby certify that the information supplied with this filing does not qualify 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 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 697, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, who all other liver impowered.

SIGNATURE:

19/201 70-107-7922

CR2E034 (10/