FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K06951

1. Corporation B & V RE	FRIGERATION, INC.						
Principal Place of Business Mailing Address							
% DONALD A. WALTERS % DONALD A. WALTERS							
513 NORTH VIRGINIA AVENUE 513 NORTH VIRGINIA AVENU WINTER PARK FL 32789 WINTER PARK FL 32789			UE		DO NOT WRITE IN THIS SPACE		
WINTER PARK FL 32789 WINTER PARK FL 32789					3. Date Incorporated or Qualifed		
					12/14/1987		
2. Principal Place of Business 2a. Mailing Address					4, FEI Number		Applied For
26					59-2860221		Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional
27		27			Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year	ar Intangible XYes .	□No
24	25	29 3	0		Personal Property Tax.		
	9. Name and Address of Currer			4 Norse	10. Name and Address of New Registe	nan whaiir	
11111	TEDO DONALD A		°				
WALTERS, DONALD A. 513 NORTH VIRGINIA AVENUE			8	2 Street Addr	ess (P.O. Box Number is Not Acceptable)		
			L		The second secon	<u> </u>	3.57 6.1 191
WIN	TER PARK FL 32789		8	3		B. B. Set	
			84 City			85 Z	ip Code
		30 3 27 - 27 - 27 - 25 - 25 - 2				FL °°	its registered
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: F	Registered A		oration submits this statement for the purpo on's board of directors. I hereby accept the ad when reinstating). DA	TE	
12.	: FOFFICERS AND DIRECTORS DP GENERAL STATE OF THE DELETE		13.			☐ Chan	
TITLE	•		1.1 TITLE		01,204,275	_	•
NAME	WALTERS, DONALD A.		1.2 NAM	i i			
STREET ADDRESS	5511 GENOA LANE			EET ADDRESS	•		
CITY-ST-ZIP	ORLANDO FL	CI DELETE		-ST-ZIP		Chan	ige [] Addition
TITLE	D DELETE		2.1 TITLE			_	
NAME	VARRASSE, BRUCE H.		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP			☐ Char	nge
TITLE 1870	BRUCE, VARRASSE H		3.2 NAME 3.3 STREET ADDRESS				
NAME					i i e i ji i i i i e i e i e i e i e i e		377.4
STREET ADDRESS							
CITY-ST-ZIP	LAKE HELEN FL 32744	Consts	_	Y-ST-ZIP	1977 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Char	nge 🔲 Addition
TITLE		☐ DELETE	4.1 TITL		-		-
NAME .	4.30 - 65		4. 2 NA				
STREET ADORESS			·	EET ADDRESS			
CITY-ST-ZIP			_	/-ST-ZIP		Char	nge Addition
TITLE			5.1 TITLE 5.2 NAME		$I_{i,j}(x, -i, j)$		-
NAME			1		est (in the installation of the installation		
STREET ADDRESS	TADORESS (1) 1		5.3 STREET ADDRESS		is the same		
CITY-ST-ZIP	(-ST-ZIP		5.4 CITY-ST-ZIP 6.1 TITLE			Cha	nge Addition
TITLE	#####################################		6.7 ITILE				
NAME	The state of the s		0.2 IVAN				

14. 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 annual report or supplemental annual 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90030 038 ***158.75