

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90177 047 ***150.00

DOCUMENT # P00000109622

1. Entity Name
REFRIGERATION & ENGINEERING SERVICE OF FLORIDA, INC.



Principal Place of Business
900 SE 3RD AVENUE
SUITE 301
FT. LAUDERDALE FL 33316

Mailing Address
318 INDIAN TRACE
SUITE # 165
WESTON FL 33327

2. Principal Place of Business

1355 Shotgun Rd

3. Mailing Address

Suite, Apt. #, etc.

City & State
Sunrise, FL

City & State

Zip
33326

Country
Broward

Zip

Country

4. FEI Number **65-1059169**

Applied For
☒ **Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRIOS, MARTIN A
936 TANGLEWOOD CIRCLE
WESTON FL 33327

Name **Jonas A. Barrios**
Street Address (P.O. Box Number is Not Acceptable) **4172 Pinewood Lane**
City **Weston** **FL** **Zip Code** **33331**

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

Jonas Barrios

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-15-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ **Delete**
NAME **BARRIOS, MARTIN A**
STREET ADDRESS **936 TANGLEWOOD CIRCLE**
CITY-ST-ZIP **WESTON FL 33327**

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☒ **Delete**
NAME **BARRIOS, JONAS A**
STREET ADDRESS **229 AIRPORT SUBDIVISION RD**
CITY-ST-ZIP **CENTER TX 75935**

TITLE ☒ **Change** ☐ **Addition**
NAME **Jonas Barrios**
STREET ADDRESS **4172 Pinewood Lane**
CITY-ST-ZIP **Weston, FL 33331**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☒ **Addition**
NAME **S maria F. martinez**
STREET ADDRESS **4172 Pinewood Lane**
CITY-ST-ZIP **Weston, FL 33331**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-03 **9549169997**

Date

Daytime Phone #

CR2E034 (10/02)