FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

445726

(3)

SUPREME REFRIGERATION, INC.

	,							
Principal Place of Business Mailing Address					II B BIII BIBIL BIBIL EIBII EIBII BIBIL BIBIL FEBI			
1975A SOUTH PARK RD PEMBROKE PARK FL 33009 US		PO BOX 590 HALLANDALE FL 33008 US						
••		•			3. Date Incorporated or Qualified 03/22/1974	3a. Date of Last Report 04/27/1995		
2. Principal Plac	ce of Business	2a. Mailing Address	;		4. FE! Number 59-1525035	Applied For Not Applicable		
Suite, Apt #, etc.			Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip	30 Cou	ntry	This corporation has liability for Florida Statutes			
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Registered Agent		
				81 Name				
	E REFRIDGERATION INC				Address (P.O. Box Number is Not Accepta	ress (P.O. Box Number is Not Acceptable)		
1975A SOUTH PARK RD PEMBROKE PARK FL 33009				83	Andrew Committee of the			
				84 City		FL 85 Zip Code		
or reg-stere familiar with	the provisions of Sections 607 0503 d agent, or both, in the State of Flor n, and accept the obligations of, Sec	ida. Such chance was au	monzed by the o	ve named co orporation's	rporation submits this statement for the pr moand of directors. Thereby accept the ap	urnose of changing its registered office		
SIGNATURE _	grature typed or prosed name of registered agen	Parattific Luggio, alpi-	(NUT: Hojedore)	Agical signature re	replaced when their defining	DA*E		
12.		IO DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12		
TEFLE	PSD	☐ DELETE	3 1 11	TLF		Change Addition		
NAME	GOLD, HOLLY R		1.2 NA	M:				
STREET ADDRESS	1975-A SOUTH PARK RD		1.3 ST	REET ADDRESS				
C:TY - ST - ZiP	PEMBROKE PARK FL		1.4 C/	Y - ST - 71P				
TITLE	VTD	DELETE	2 1 T	TLF		Change Addition		
NAME	gold, herbert a		2.2 NA	ME				
STREET ADDRESS	PO BOX 580 N/A		2351	REE1 AUDRESS				
City-St-ZiP	HALLANDALE FL		2 4 C+	Y-ST-ZiF				
TITLE		DELETE	3 1 T:	í L F		Change C Addition		
NAME			3 2 NA	ME :				
STREET ADDRESS			33 \$1	REEL ADORESS				
CITY-ST-ZIP			3.4.0)	Y-S: 7P				
TITLE		DELETE	4 1 11	!LF		Change Addition		
NAME			4.2 N	ME				
STREET ADDRESS			43.80	REET ADDRESS		i		
CITY - ST - ZIP			4.4 CI	Y-SI-Z∂				
THTLE		DELETE	5 ' Ti	īLE		Change Addition		
NAME			5.2 NA	ME				
STREET ADDRESS			5351	REE! ACORESS				
CITY - ST - ZIP			5.4 CI	y - ST - Zi≥				
TITLE		☐ DELETE				Change Addition		
NAME			6.2 NA	Mi				
STREET ADDRESS			6351	REE1 ADORESS				
CITY-ST-ZIP				IV-ST ZIP				

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qually for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this armual report or supplienental 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 on powered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or tranged, or our materiment with an ardress

SIGNATURE

SIGNATURE

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylor of Project N SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR