

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 90435 046 ***150.00

0390735 AV

DOCUMENT # 562711

1. Entity Name
FRIGID AIR, INCORPORATED

Principal Place of Business
332 SPYGLASS WAY
JUPITER FL 33477
US

Mailing Address
332 SPYGLASS WAY
JUPITER FL 33477
US



2. Principal Place of Business
8699 SE ISLAND WAY
 Suite, Apt. #, etc.

3. Mailing Address
8699 SE ISLAND WAY
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Jupiter FL

City & State
Jupiter FL

4. FEI Number **59-1822264**
 Applied For
 Not Applicable

Zip **33458** Country

Zip **33458** Country

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

NADLER, JOSEPH
332 SPYGLASS WAY
JUPITER FL 33477

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	NADLER, ESTHER L	
STREET ADDRESS	332 SPYGLASS WAY	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	STD	<input type="checkbox"/> Delete
NAME	NADLER, JOSEPH	
STREET ADDRESS	332 SPYGLASS WAY	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8699 S.E. ISLAND WAY	
CITY-ST-ZIP	JUPITER, FL 33477	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8699 S.E. ISLAND WAY	
CITY-ST-ZIP	JUPITER, FL 33458	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Joseph Nadler** **2/27/02** **561-747-2268**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)