Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90034 050 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

1. Corporation Name

SUUTHERN REPRIGERATION C						
Principal Place of Business	Mailing Address			7 1981199 1117 99187 9119 1117 1881	.,	
3038 JOHN YOUNG PKWY ORLANDO FL 32804	3038 JOHN YOUNG PKWY ORLANDO FL 32804					
ORDANDO CE 32004	ONDINOO TE GEGOT			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				11/01/1980		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	26			59-20426 <u>76</u>		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 Country 24 25		Country	·	This corporation owes the curre Personal Property Tax.		gible]Yes □No
24 25 25 9. Name and Address of C				10. Name and Address of New R	egistered Ag	ent
,		81	Name			
LUDWIN ERIC W ESQ			Street Addre	ss (P.O. Box Number is Not Acceptal	ble)	
705 DOUGLAS AVENUE						
SUITE 1275 ALTAMONTE SPRINGS FL 32714	1	83	· [
		84			FL	85 Zip Code
Pursuant to the provisions of Sections 60 office or registered agent, or both, in the sagent. I am familiar with, and accept the control of the control	7.0502 and 607.1508, Florida Statutes, the State of Florida. Such change was authori obligations of, Section 607.0505, Florida S	zea ov	the corporation	ration submits this statement for the page 3 board of directors. I hereby accept	ourpose of cha t the appointm	anging its registered nent as registered
SIGNATURE					DATE	
Signature, typed or printed name of register		ered Age	nt signature required	ADDITIONS/CHANGES TO OFF		DIRECTORS IN 12
12. OFFICERS AND DIRECTORS 13.			· · · · · · · · · · · · · · · · · · ·	ADDITIONS/GITARGES TO OFF		Change Addition

TORS IN 12 ☐ Addition TITLE CARTER, PAUL E 1.2 NAME NAME 3038 JOHN YOUNG PARKWAY 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 2.1 TITLE TITLE MARKHEIM, RICHARD M. 2.2 NAME NAME 3038 JOHN YOUNG PARKWAY 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 517III E TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-7IP

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 frustee smoowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of on an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)