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



Sandra B. Mortham

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 29 1997 8:00am Secretary of State			
 Corporation 	RADIATORS, INC.	(1) Mailing Address					
5131 E TENTH HIALEAH FL 33		5131 E TENTH AVE HIALEAH FL 33013-1729			3. Date Incorporated or Qualified	3a. Date of Last Re	eport (
9 Principal P	iane of Business	2a. Mailing Address	·		02/20/1981 4. FEI Number	04/26/1996	plied For
21	icias vi ibu girid du	26			59-2065199		t Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	
22	0	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	May Be
Zip	Country 25	Zip 29	Country 30		This corporation has fiability for in Florida Statutes	ntringible tax under s Yes □ No	
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Re	jistered Agent	
MARTINEZ, JOSE RAMON 5125 3 10TH AVENUE						1- X	
SUITE 104				Street Add	dress (P.O. Box Number is Not Acceptab	e)	
HIAL	EAH FL 33013		83				
			84	City		FL 85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-	named co	rporation submits this statement for the p		s registered
agent la	egistered agent, or both, in the State in familiar with, and accept the oblice.	of Florida. Such change was a ations of, Spetion 607.0505, Flo	uthorized by t rida Statutes.	ne corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	t the appointment as	registerea
SIGNATURE	COL POSSING OF THE STAND A	ent and title if applicable (NOTE	Rog Mered Agent	signature req	ulred when reinstating)	DATE	
12.	OFFICERS AN	OFFICERS AND DIRECTORS 1			ADDITIONS/CHANGES TO OFFIC		
DILE	PVS MARTINEZ, JOSE R	DELETE 1.				L Change	Addition
NAME STREET ADDRESS	5131 E TENTH AVE		1.2 NAME 1.3 STREET A	nnpree			
City - \$1 - ZiP	HIALEAH, FL 00000	TI 00000		ZIP			
THLF	DELETE		2.1 TITLE			Change	Addition
NAM!			2 2 NAME		4.1		
STREET ADDRESS			2.3 STREET A	1			
CHY-S1-ZIP TITLE		DELETE	2.4 CHY-ST 3.1 TITLE	-ZIP		Change	Addition
NAME			3.2 NAME	}			:=
STREET ADORESS			3.3 STREET A	DDRESS			}
CITY-51-7IF			3.4. CITY - ST	- ZIP			
TITLE		☐ DELETE	41 TITLE	+		☐ Change	Addition
NAME STREET ADDRESS			4. 2 NAME 4.3 STREET A	ndress I			
CHY-SI-ZP		<u></u>	4.4 CiTY-ST-				
HILE		DELETE	5.1 TITLE			Change	Addition
NAME			52 NAME				
STREET ADDRESS	,		5.3 STREET A		,		
CPY ST-769		DELETE	5 4 CITY-ST- 61 TITLE	21P	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Change	Addition
NAME :			6.2 NAME	ļ		.—	
STREET ADDRESS			63 STREET A	ODRESS			
City St-7IP			6.4 CITY-ST-	zip			

14. I do hereby cellly 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 included 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 this 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.

SIGNATURE: *

0119238

FILED