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Feb 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F62489

(2)

1. Corporation Name  
RES PANEL REFRIGERATION CORP.



Principal Place of Business

7215 NW 36TH AVE  
7215 NW 36TH AVENUE  
MIAMI FL 33147-5835

Mailing Address

7215 NW 36TH AVE  
7215 NW 36TH AVENUE  
MIAMI FL 33147-5835

3. Date Incorporated or Qualified  
02/19/1982

3a. Date of Last Report  
04/10/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2187987

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

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNANDEZ, JUAN  
7215 NW 36TH AVENUE  
MIAMI FL 33147

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	DELETE
NAME	HERNANDEZ, JUAN	
STREET ADDRESS	7215 NW 36TH AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	DELETE
NAME	HERNANDEZ, MERCEDES	
STREET ADDRESS	7215 NW 36TH AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	PD	DELETE
NAME	HERNANDEZ, JUAN J	
STREET ADDRESS	7215 NW 36TH AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VD	DELETE
NAME	RODRIGUEZ, AUREA MARIA	
STREET ADDRESS	7215 NW 36TH AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	DELETE
NAME	HERNANDEZ, MARIA EUGENIA	
STREET ADDRESS	7215 NW 36TH AVENUE	
CITY-ST-ZIP	MIAMI FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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:

*Aurea Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)