FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F96097** **(3)**

1. Corporation Name
OCEAN REFRIGERATION, AIR CONDITIONING & HEATING, INC.

Principal Place of Business	Mailing Address
2711 N. ANDREWS AVENUE FT. LAUDERDALE FL 33311 US	2711 N. ANDREWS AVENUE FT. LAUDERDALE FL 33311 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/18/1982**
3a. Date of Last Report: **07/12/1994**

2. Principal Place of Business	2a. Mailing Address
21 672 N.E. 40th Court	26 672 NE 40th Court
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Ft. Lauderdale, FL	City & State 28 Ft. Lauderdale, FL
Zip 24 33334 Country 25 USA	Zip 29 33334 Country 30 USA

4. FEI Number: **59-2212863** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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
BIERNAT, SHAWNEE M. 2711 N. ANDREWS AVENUE FT. LAUDERDALE FL 33311	81 Name: Shawnee Biernat 82 Street Address (P.O. Box Number is Not Acceptable): 672 NE 40th Court 83 84 City: Ft. Lauderdale FL 85 Zip Code: 33334

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: Same
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	PVD	1.1 TITLE	PVD	☐ Change ☐ Addition
NAME	BIERNAT, THOMAS F	1.2 NAME	BIERNAT, THOMAS	
STREET ADDRESS	238 OCEANIC AVENUE	1.3 STREET ADDRESS	4451 SW BOATRAMP AVE.	
CITY-ST-ZIP	LAUD-BY-THE-SEA FL	1.4 CITY-ST-ZIP	PALM CITY, FL. 34990	
TITLE	ST	2.1 TITLE	ST	☐ Change ☐ Addition
NAME	BIERNAT, SHAWNEE M	2.2 NAME	BIERNAT, SHAWNEE M	
STREET ADDRESS	238 OCEANIC AVENUE	2.3 STREET ADDRESS	4451 SW BOATRAMP AVE.	
CITY-ST-ZIP	LAUD-BY-THE-SEA FL	2.4 CITY-ST-ZIP	PALM CITY, FL. 34990	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: X _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95 (305)565-8588
Date Daytime Phone #

0818141 CP