

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # H90376**

1. Entity Name

**P & D METALS AND REFRIGERATION, INC.****FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**

05-18-2001 90020 007 \*\*\*150.00

Principal Place of Business

**1150 BEULAH RD.  
WINTER GARDEN FL 34787  
US**

Mailing Address

**P.O. BOX 783123  
WINTER GARDEN FL 34778-3123  
US**

2. Principal Place of Business

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

**420 S. Vineland Rd. (CR535)**

Suite, Apt. #, etc.

City &amp; State

**Winter Garden, FL**

City &amp; State

4. FEI Number

**59-2613402**

Applied For

Not Applicable

Zip

**34778**

Country

**Orange**

Zip

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

**HARRIS, PEGGY P.  
1150 BEULAH RD.  
WINTER GARDEN FL 34787**

Name

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

**420 S. Vineland Rd., (SR 535)****Winter Garden, FL 34778**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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** ☐ Delete  
NAME **HARRIS, PEGGY P.**  
STREET ADDRESS **12944 REAVES ROAD**  
CITY-ST-ZIP **WINTER GARDEN FL**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
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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:

**Peggy Harris**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**Peggy Harris, President**

5/1/01

Date

407-905-9970

Daytime Phone #

CR2E034 (10/00)