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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # J45724 (8)

1. Corporation Name
REFRIGERANT RECOVERY SYSTEMS, INC.

Principal Place of Business

Mailing Address

~~8001 WEST NASSAU STREET~~
TAMPA FL 33607

~~P.O. BOX 24685~~
TAMPA FL 33623



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Rt. 1 Seaborn Rd.
Suite, Apt. #, etc.

2a. Mailing Address

25 P.O. Box 443
Suite, Apt. #, etc.

22 City & State

23 Ponder, TX

24 Zip 76259 25 Country USA

27 City & State

28 Ponder, TX

29 Zip 76259 30 Country USA

9. Name and Address of Current Registered Agent

MACKENZIE, ROBERT H
28705 BENNINGTON DR.
WESLEY CHAPEL FL 33544

3. Date Incorporated or Qualified

12/01/1986

4. FEI Number

59-2713786

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

SD
NAME TAYLOR, DIAN
STREET ADDRESS 5005 W. NASSAU ST.
CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ DELETE

PD
NAME TAYLOR, SHELTON
STREET ADDRESS 5005 W. NASSAU ST.
CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ DELETE

V
NAME GOMES, SHELLI N
STREET ADDRESS 5005 W. NASSAU ST.
CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS Rt. 1 Seaborn Rd.
1.4 CITY-ST-ZIP Ponder, TX 76259

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS Rt. 1 Seaborn Rd.
2.4 CITY-ST-ZIP Ponder, TX 76259

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS Rt. 1 Seaborn Rd.
3.4 CITY-ST-ZIP Ponder, TX 76259

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 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

[Signature]

3-1-1998

CR2E034 (10/97)