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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L78762

(6)

**GONZALEZ REFRIGERATION INC.** 

FILED
May 02 1997 8:00am
Secretary of State



Principal Place of Business  40 EAST OTH ST. 24 E VITH ST HALEAH FL 33010 US		Mailing Addres % Jose Luis C 24 E 9TH ST HIALEAH FL 333	GONZALEZ			Date Incorporated or Qualified			
	**************************************				·	06/05/1990	05/01	/1996	
	lace of Business	2a. Mailing Add	dress	. –		4. FEI Number			oplied For
21 Suite, Apt.	# pto	26 Suite And	# oto		· · · · · · · · · · · · · · · · · · ·	65-0196096			ot Applicable
22 Suite, Apr.	#, etc.	Suite, Apt.	₩, EIÇ.			5. Certificate of Status Desired			Additional equired
City & State	е	City & State	·····			6 Floation Compaign Financiae			
23		28	•			Election Campaign Financing     Trust Fund Contribution	П		May Be to Fees
Zip	Country	Zip		Country		8. This corporation has liability for it	ntangible ta		
24	25	29	30			Florida Statutes	Yes X	No	1. 100.002
	9. Name and Address of Curr					10. Name and Address of New Reg			
11: Pursuant office or r	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obli	502 and 607.1508, Flo	ange was autho	orized by	City 3-named corp	poration submits this statement for the p	FL	nanging i	Code ts registered registered
SIGNATURE		ND DIRLCTORS		giskered Age	nt signature requi	ired which reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND D	IRECTOR	RS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GONZALEZ, JOSE LUIS 1361 SW 14 ST MIAMI FL		DELETE	1.4 THLE 1.2 NAME 1.3 STREET 1.4 CHY-S			L.	<b>J</b> Change	Addition
TITLE NAME STREET ADDRESS				2   THLE 2   NAME 2   STREET				) Change	Addition
CITY-ST-ZIP TITLE NAME			DELFTE	2 4 CITY - S 3.11 TITLE 3 P NAME	ST-ZIP		С	Change	Addition
STREET ADDRESS CITY-ST-ZIP				3.8 STREET 3.4. CITY - 5					
TITLE NAME			DELETE	4.1 TITLE 4. 2 NAME				] Change	Addition
STREET ADDRESS			İ	4.B STREET					
:CITY-ST-ZIP		, <del>                                     </del>	DELETE	4.# CITY - S 5.1.1111.6	1 - ZIP		г	Change	Addition
NAME		<u>.</u>		5.P NAME				_ Ghange	Addition
STREET ADDRESS CITY-ST-ZIP				6.B STREET					
TITLE NAME			DELETE	5 # CITY - S 6 # TITLE 6 P NAME	1-207			Change	Addit an
STREET ADDRESS				6.P NAME 6.B STREET	ADDDECC				
CITY-ST-ZIP									
M11-91-71	<u> </u>	,		6.4 CITY - S	1 - 74F				

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 or an attaction on with an address.

Munals

11/05/07

1- - DUC-08 116