


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L78762 1. Entity Name GONZALEZ REFRIGERATION INC.	
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Principal Place of Business 1361 SW 14TH ST MIAMI, FL 33145 US	Mailing Address 1361 SW 14TH ST MIAMI, FL 33145 US
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**DO NOT WRITE IN THIS SPACE**



04192005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0196096	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, JOSE LUIS  
 1361 SW 14TH ST  
 MIAMI, FL 33145

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GONZALEZ, JOSE LUIS 1361 SW 14 ST MIAMI, FL 33145
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 04/25/05-80062-001 150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X *Jose L Gonzalez* Jose L Gonzalez 04/23/05 (305) 856-9663  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #