2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2006 08:00 AN Secretary of State

DOCUMENT # M11617 1. Entity Name REFRIGERATION SALES & EXPORT, INC.				Secretary of Stat			
Principal Place		Mailing Address 4230 S.W. 75 AVENUE					
4230 S.W. 75 MIAMI, FL 33		MIAMI, FL 33155					
,							
_				01262006	No Chg-P	CR2E034 (11/05)	
D	O NOI WRII	E IN THIS SPA	ICE	4. FEI Number 59-24943	AE .	Applied For	
			- انسان د.	5. Certificate of S		\$8.75 Additional Fee Required	
	6. Name and Address of Curre	ent Registered Agent		\		<u> </u>	
TIOMNO, CESAR				DO N	IOT WR	ITE	
4230 SW 75 AVE MIAMI, FL 33155			IN THIS SPACE				
the obligati	named entity submits this statemer ons of registered agent.	it for the purpose of changing its regist	ered office or register	red agent, or both, i	n the State of Florida	. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered as	gent and title if applicable. (NOTE, Regist	ered Agent signature required	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ly 1, 2006 Fee will be \$55	9. Election Campaign Fir Trust Fund Contribution		.00 May Be led to Fees			
10.		ND DIRECTORS					
TITLE NAME	PD TIOMNO, CESAR						
STREET ADDRESS CITY+ST-ZIP	8850 S.W. 62ND TERR. MIAMI, FL	•			000000 -05/08/06-	535543 80058-007 158.79	
	00	_ <u> </u>	 ∤		and most diffe		

DO NOT WRITE IN THIS SPACE

12.	. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 addless, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

TITLE NAME STREET ADDRESS

TITLE
MANNE
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
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CITY-ST-ZIP

KANAREK DETIOMNO, CECILIA

8850 S.W. 62ND TERR.

MIAMI, FL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

hal 15/06 264200