FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M40670** **(5)**

1. Corporation Name
SAEZ REFRIGERATION OF HIALEAH, INC.

Principal Place of Business	Mailing Address
C/O PEDRO J. SAEZ 1125 N.W. 76TH AVENUE MIAMI FL 33126	C/O PEDRO J. SAEZ 1125 N.W. 76TH AVENUE MIAMI FL 33126

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/27/1986**
3a. Date of Last Report: **04/22/1994**

2. Principal Place of Business
21: 1695 W 32nd PLACE
22: Suite, Apt. #, etc.
23: HIALEAH FL. 33010
24: Zip 33122 — 25: Country USA.

2a. Mailing Address
26: 8290 NW 25 STREET
27: Suite, Apt. #, etc.
28: MIAMI FL.
29: Zip 33122 — 30: Country USA.

4. FEI Number: **59-2731783** ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SAEZ, PEDRO J. 1125 N.W. 76TH AVENUE MIAMI FL 33126	01 Name: SAEZ, PEDRO J. 02 Street Address (P.O. Box Number is Not Acceptable): 8290 NW 25 STREET 03: 04 City: MIAMI FL 05 Zip Code: 33122

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] 1-31-95
Signature of new registered agent (if applicable) — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	DP	☑ Change ☐ Addition
NAME	SAEZ, PEDRO J.	12 NAME	SAEZ, PEDRO J.	
STREET ADDRESS	1125 NW 76 AVE	13 STREET ADDRESS	8290 NW 25 STREET	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	MIAMI FL. 33122	
TITLE	DT	21 TITLE	DT	☑ Change ☐ Addition
NAME	SAEZ, CONSUELO	22 NAME	SAEZ CONSUELO	
STREET ADDRESS	1125 NW 76 AVE	23 STREET ADDRESS	8290 NW 25 STREET	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	MIAMI FL 33122	
TITLE	DS	31 TITLE	DS	☑ Change ☐ Addition
NAME	SAEZ, JORGE	32 NAME	SAEZ JORGE	
STREET ADDRESS	1125 NW 76 AVE	33 STREET ADDRESS	8290 NW 25 STREET	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	MIAMI FL 33122	
TITLE	DVP	41 TITLE	DVP	☑ Change ☐ Addition
NAME	SORDO, CESAR	42 NAME	SORDO, CESAR	
STREET ADDRESS	1125 NW 76 AVE	43 STREET ADDRESS	8290 NW 25 STREET	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	MIAMI FL. 33122	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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] CESAR SORDO 1/31/95 305-592-2330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0132000 CP