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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # M40670

1. Corporation Name

(5)

SAEZ REFRIGERATION OF HIALEAH, INC.

FILED
Jan 16 1997 8:00am
Secretary of State



Principal Place of Business C/O PEDRO J. SAEZ 1896 W 32NO PLACE HALEAH FL 33020 US		Mailing Adoress 8290 NW 25 STREET 1125 N.W. 76TH AVENUE MIAMI FL 33122-1506 US		3. Date Incorporated or Qualified	
2. Principa 21	Place of Business	2a. Mailing Address 26 <b>8290</b> NW	25 Street	4. FEI Number	Applied For Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & St.	nte	City & State	=4.	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ <b>24</b>	Country 25	Zip 29 33/12 2 3	Country  DADE		Yes No
	<ol><li>Name and Address of Cu</li></ol>	irrent Registered Agent		10. Name and Address of New Reg	ristered Agent
	ez, pedro J.		81 Name		
82	90 NW 25 STREET		82 Streiet Addre	ess (P.O. Box Number is Not Acceptable	۵
MIAMI FL 33122			July Street Addre	- Street Address (1.0. Dox 110-1126) 13 Not Accoptable)	
			83		
			<b>84</b> City		FL 85 Zip Code
office or	r registered agent, or both, in the 5 am famic ar with, and accept the c :	State of Florida, Such change was aut obligations of, Section 607,0505, Flori	horized by the corporate da Statutes.	pration submits this statement for the po on's board of directors. I hereby accep	t the appointment as registered
10	Significant type disciplinated come of require to Countries OC	or agon ann sile if application (NOT). F S AND DIRECTORS	Hightered Agent signature require  13.	d when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE EDG AND DIRECTORS IN 12
12.	DP OFFICE	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
	SAEZ, PEDRO J	E picti			Onling Addition
NAME	DOOD ARM OF CYDERY		1.2 NAME		
STREET ADDREST	MIAMI FL		1.3 STREET ADORESS		
CiTY - ST - ZIP	DT DT	Louis	1.4 CITY-ST-ZIP		Change Additio
THE	[ " "	☐ DELETE	2 1 TITLE		Change Additio
NAMÉ	SAEZ, CONSUELO		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL	Dr. car	2 4 CITY+ST-ZIP		Down Haddin
TITLE	DS SAEZ JODGE	DELETE	3 1 TITLE		Change Addition
NAME	SAEZ, JORGE 8290 NW 25 STREET		32 NAME		
STREET ADDRESS	*		3.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL.	F. 57/	3.4. CITY - ST - ZIP		Character Tables
TITLE	DVP COPPO CECAR	☐ DELETE	41 TITLE		Change Addition
NAME	SORDO, CESAR		4 2 NAME		
STREET ACORES			4.3 STREET ADDRESS		
CITY-S1-ZP	MIAMI FL	DELETE	4.4 CITY - ST - ZIP		Character 1 4 4 2 2 2 2
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRES	S		5.3 STREET ADDRESS		
CITY-ST-7IF		Delete	5.4 CITY - ST - ZIP		Dha 11-220.
THTLE		L.) DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAMÉ		
STREET ADDRES	5		6.3 STREET ADDRESS		
CITY-SI-ZIP			6.4 CHTY - ST - ZIP	•	

14. 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 on an attachment with an address.

SIGNATURE:

PEDRO J. SAEZ

1-6-97

305-592-2330

Daylime Phone #