2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2007 08:00 AM Secretary of State **DOCUMENT # M49137** 1. Entity Name REFRIGERATION UTILITIES, INC. Mailing Address Principal Place of Business C/O ROBERT J. TAYLOR 21521 WOODCHUCK CT BOCA RATON, FL 33428 21521 WOODCHUCK CT **BOCA RATON, FL 33428** No Chg-P CR2E034 (11/05) 01042007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2338897 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TAYLOR, ROBERT J 21521 WOODCHUCK CT BOCA RATON, FL 33428 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 Signature, typed or printed name of registered agent and atte if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS **PSTD** TITLE TAYLOR, ROBERT J. NAME STREET ADDRESS 21521 WOODCHUCK CT CITY-ST-ZIP BOCA RATON, FL 33428 TITLE NAME U00000728932 05/08/07-80020-005 150.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information sy indicated on this report or supplement of the corporation or the receiver of tr changed, or on an attachment with an applied with hisfilling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information rital report is frue and the another and that my signature shall have the same legal effect as if made under cath; that I am an officer or director rustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if a address, with a first proposers.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP