

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000093782

1. Entry Name
R.K.O. REFRIGERATION CORPORATION

FILED

03 JAN 15 PM 1:00

DEPT. OF STATE
TALLAHASSEE, FLORIDA

2003 UBR

Principal Place of Business
3601 WEST COMMERCIAL BLVD.
SUITE 39
FORT LAUDERDALE FL 33309
USMailing Address
3601 WEST COMMERCIAL BLVD.
SUITE 39
FORT LAUDERDALE FL 33309
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2377236

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIROCCO, RAYMOND M
3601 WEST COMMERCIAL BLVD.
SUITE 39
FORT LAUDERDALE FL 33309

Name Osborne, Roger

Street Address (P.O. Box Number is Not Acceptable)

3601 W. Commercial Blvd. #39

City

F. Lauderdale

FL

Zip Code

33309

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

Roger K. Osborne

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-14-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$350.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIROCCO, RAYMOND M 3601 WEST COMMERCIAL BLVD. #39 FORT LAUDERDALE FL 33309	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D Osborne, Roger 3601 W. Commercial Blvd. #39 Fort Lauderdale, FL 33309	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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01/15/03--01080--004 **150.00

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 resolver 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:

Roger K. Osborne

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)