2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000153905

1 Entity Name

POLAR AIR CONDITIONING & REFRIGERATION, INC.



FILED Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

410 SE 2ND AVENUE OKEECHOBEE, FL 34974 Mailing Address

410 SE 2ND AVENUE OKEECHOBEE, FL 34974



DO NOT WRITE IN THIS SPACE

02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0504765

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLSON, D. ROBERT 410 SE 2ND AVENUE OKEECHOBEE, FL 34974

CITY-ST-ZIP

DO NOT WRITE 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, type or profiled name of registered agent and libe if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			-	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P,D WILLSON, D. ROBERT 410 SE 2ND AVENUE OKEECHOBEE, FL. 34974	TORS			U000000 com
TITLE HAME STREET ADDRESS CITY-ST-ZIP	STD FERRERO, CARL 331 SE 28TH STREET OKEECHOBEE, FL 34974				U00000646674 03/06/07-80041-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				iN	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I hereby certify that the information supplied with this filling 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 address, with all other like empowered.

SIGNATURE: SOMM 3/23/05