## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000151234  1. Entity Name J.V. COMMERICAL/RESIDENTIAL REFRIGERATION SERVICE, INC.						SECRE DIVISION I	FILED TARY OF STATE OF CORPORATION	
Principal Place of Business Mailing Address			_			00 400	· CORPORATION	¥9
1612 N. 27TH AVENUE HOLLYWOOD, FL 33020 US		1612 N. 27TH AVENUE HOLLYWOOD, FL 33020 US					-	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02292008	Chg-P	CR2E034 (12/06)	
City & State		City & State			4. FEI Numb った・奈	20-378	2970 A	optied For ot Applicable
Zip •	Country	Zìp	Country		5. Certificate	of Status Desired	S8.75 Add	ditional
Name and Address of Current Registered Agent				ame	7. Name and	Address of New Re	egistered Agent	
VALENCIA, JORGE 1612 N. 27TH AVE HOLLYWOOOD, FI		Street Address		P.O. Bax Numb	er is Not Acceptable)	)		
Λ				ity			FL Zip Cod	le
8. The above named each 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								
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFFIC	CERS AND DIRECTOR	S IN 11
			TITLE NAME		1	001227	Change	☐ Addition_ 3
STREET ADDRESS 1612 N. 27TH AVENUE STR CITY-ST-ZIP HOLLYWOOD, FL 33020 CIT			STREET AD	- 1	04/1	0/0801005	7 <b>74391</b> 023 **150	0.00
_ 55/65			TITLE				☐ Change	☐ Addition~
STREET ADDRESS ( CITY-ST-ZIP	ADDRESS STR			DRESS ZIP				
TITLE	☐ Delete TITLE						☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP CITY				DRESS ZIP				<u></u>
TITLE NAME	☐ Delete TITLE				•		☐ Change	☐ Addition
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STREET ADDRESS CITY-ST-ZIP			STREET AD	l l				 
TITLE NAME		☐ Delete	TITLE		/	1 .	☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET AD	' /	4/2	108		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied with the sand 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 for 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:								
STIGNATURE. Date Daylime Prone #								