

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113619

FILED
Mar 16, 2008
Secretary of State

Entity Name: MASTER-TECH REFRIGERATION CORP.

Current Principal Place of Business:

8004 NW 154 ST #643
MIAMI LAKES, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

8004 NW 154 ST #643
MIAMI LAKES, FL 33016 US

New Mailing Address:

FEI Number: 20-5482231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALWANT CHEEMA, P.A.
4160 WEST 16TH AVE
SUITE 309
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VELIZ, LEONEL
Address: 8004 NW 154 ST #643
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: T () Delete
Name: VELIZ, LEONEL
Address: 8004 NW 154 ST #643
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: VP () Delete
Name: VELIZ, JACQUELINE
Address: 8004 NW 154 ST # 643
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: S () Delete
Name: VELIZ, JACQUELINE
Address: 8004 NW 154 ST # 643
City-St-Zip: MIAMI LAKES, FL 33016 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONEL VELIZ

PRES

03/16/2008

Electronic Signature of Signing Officer or Director

_____ Date