## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000118345

FILED Sep 04, 2007 Secretary of State

Entity Name: O. K. OSCEOLA KISSIMMEE REFRIGERATION AND APPLIANCE REPAIR INC.

Current Pr	incipal Place	e of Business:	New Principal Place	of Business:	
2506 PARA KISSIMMEI	ADISE CIR E, FL 34744				
Current Mailing Address:		New Mailing Address:			
2506 PARA KISSIMMEI	ADISE CIR E, FL 34744		2682 MILL RUN BLVD KISSIMMEE, FL 3474		
FEI Number:	20-5540137	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	NDRA S RUN BLVD E, FL 34744	US			
		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
The above in the State	of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
in the State	of Florida.	submits this statement for the particles of Registered Agric Signature of Registered Agr		d office or registered agent, or both,  Date	
in the State SIGNATUR In accordance Election Carr	of Florida.  RE: Electron  ce with s. 607.19	nic Signature of Registered Ago (3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.		
in the State SIGNATUR In accordance Election Carr	e of Florida.  RE: Electron se with s. 607.19 apaign Financin S AND DIREC	nic Signature of Registered Agr (3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ). FTORS: ) Delete MELA S N BLVD	ent ot receive the prior notice.	Date	

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: SANDRA S. HUFF VP 09/04/2007