

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000029327

FILED
Aug 26, 2008
Secretary of State

Entity Name: SUB-ZERO AIR CONDITIONING & REFRIGIRATION SYSTEM INC

Current Principal Place of Business:

3620 NORTH ANDREW AVENUE
OAKLAND PARK, FL 33309

New Principal Place of Business:

449 NW 45 ST
OAKLAND PARK, FL 33309

Current Mailing Address:

3620 NORTH ANDREW AVENUE
OAKLAND PARK, FL 33309

New Mailing Address:

449 NW 45 ST
OAKLAND PARK, FL 33309

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CABRERA, OSMANI
3620 NORTH ANDREW AVENUE
OAKLAND PARK, FL 33309 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CABRERA, OSMANI
Address: 3620 NORTH ANDREW AVENUE
City-St-Zip: OAKLAND PARK, FL 33309

Title: VP () Delete
Name: CABRERA, ASIEL
Address: 3620 NORTH ANDREW AVENUE
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CABRERA, OSMANI
Address: 449 NW 45 ST
City-St-Zip: OAKLAND PARK, FL 33309

Title: VP (X) Change () Addition
Name: CABRERA, ASIEL
Address: 449 NW 45 ST
City-St-Zip: OAKLAND PARK, FL 33309

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: OSMANI CABRERA

P

08/26/2008

Electronic Signature of Signing Officer or Director

_____ Date