

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P22403**

1. Entity Name  
**UNITED REFRIGERATION, INC. OF PENNSYLVANIA**



Principal Place of Business  
**CARMEN D CAROSELLA VP, C.F.O.**  
**11401 ROOSEVELT BLVD.**  
**PHILADELPHIA, PA 19154**

Mailing Address  
**11401 ROOSEVELT BLVD.**  
**ATTN: TAX DEPT.**  
**PHILADELPHIA, PA 19154**



03222007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>23-1307731</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**SMITH, PAT**  
**2400 N. W. 23RD STREET**  
**MIAMI, FL 33142**

**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, typed or printed name of registered agent and title 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 Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD REILLY, JOHN H. JR. 1310 MONTGOMERY AVE ROSEMONT, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD REILLY, ELIZABETH 1310 MONTGOMERY AVENUE ROSEMONT, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HOPE, NICHOLAS V 74 GOVERNOR MARKHAM GLEN MILLS, PA 19342
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS CAROSELLA, CARMEN D. 220 CEDAR PLACE WAYNE, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D REILLY, III, JOHN H 424 LOUELLA AVE WAYNE, PA 19085
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HUNTOWSKI, JOSEPH S 28 WOODBROOK ROAD VOORHESS, NJ 08043

U000000692520  
04/16/07-80003-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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:**

*Joseph S Huntowski*

**JOSEPH S HUNTOWSKI/ASST SECRETARY**

**215-602-8295**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*4/2/07*