

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortmann  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P92000009971 (2)**

1. Corporation Name

**FRARY AIR CONDITIONING, INC.**



Principal Place of Business

9530 SW 112 STREET  
MIAMI FL 33176-3649  
US

Mailing Address

1408 CASTILE AVE  
CORAL GABLES FL 33134  
US

3. Date Incorporated or Qualified

12/07/1992

3a. Date of Last Report

04/28/1995

2. Principal Place of Business

2a. Mailing Address

21 8306 Mills Dr

26 8306 Mills Dr.

4. FEI Number

65-0384974

Applied For

Not Applicable

22 Suite, Apt. #, etc

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State  
Miami, FL

28 City & State  
Miami, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip  
33183

25 Country  
USA

29 Zip  
33183

30 Country  
USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

LOSNER, STEVEN D  
633 N. KROME AVE.  
HOMESTEAD FL 33030

10. Name and Address of New Registered Agent

81 Name Zimmerman Marconi & Co.  
82 Street Address (P.O. Box Number is Not Acceptable) 13320 S.W. 128 St.  
83  
84 City Miami FL 85 Zip Code 33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

4/2/96

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	FRARY, RICHARD H	
STREET ADDRESS	9530 SW 112TH ST.	
CITY - ST - ZIP	MIAMI FL 33176	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FRARY, R R	
STREET ADDRESS	9530 SW 112TH ST.	
CITY - ST - ZIP	MIAMI FL 33176	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	R. REED FRARY
23 STREET ADDRESS	8306 Mills Dr., Suite 685
24 CITY - ST - ZIP	Miami, FL 33183
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]* R. REED FRARY

4/29/96

(305) 235-2112

CR2E034 (12/95)