FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P93000085056 (8)**

1. Corporation Name
NORTH AMERICAN REFRIGERATION, INC.

Principal Place of Business
526 STOCKTON ST.
JACKSONVILLE FL 32204

Mailing Address
526 STOCKTON ST.
JACKSONVILLE FL 32204

3. Date Incorporated or Qualified: 12/01/1993
3a. Date of Last Report: 03/02/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-3213841 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

9. Name and Address of Current Registered Agent
HOLBROOK, H L
ONE INDEPENDENT DR.
SUITE 2301
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505(2) and 607.0506(2), 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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
D	HOLBROOK, H L	1 INDEPENDENT DR., SUITE 2301	JACKSONVILLE FL 32202	[ ]
P	LEVANGIE, DONALD L.	526 STOCKTON ST	JACKSONVILLE FL	[ ]
V	WALKER, CURTIS A	526 STOCKTON ST	JACKSONVILLE FL	[ ]
V	ANDERSON, SIDNEY E	526 STOCKTON ST	JACKSONVILLE FL	[ ]
S	PAINTER, ROGER W	526 STOCKTON ST	JACKSONVILLE FL	[ ]
				[ ]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	Change	Addition
21	22	23	24	[ ]	[ ]
31	32	33	34	[ ]	[ ]
41	42	43	44	[ ]	[ ]
51	52	53	54	[ ]	[ ]
61	62	63	64	[ ]	[ ]

14. I do hereby certify that the information supplied herein, including, if applicable, the supplemental information required to be furnished under Section 119.07(3)(k), Florida Statutes, is true and accurate. I further certify that the information indicated on this amendment or supplement is in addition to the information on file with the Department of State. I understand that the filing officer may require proof of the authority of the person or persons signing this report 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 is added to any document with an address.

SIGNATURE: Roger W Painter — 3-28-96 — (904) 388-2696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)