## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000017785 (4)

TROPICAL REFRIGERATION, INC.

## FILED May 01 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								4 19811881 118 18111 81811 83114 86131 88111 8815		DIRECTIFICATIONS	
2531 NASSAU			2531 NASSAU LANE								
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33					33312			DO NOT WRITE IN THIS SPACE			
								3. Date incorporated or Qualified			٦
								03/02/1994			Ì
2. Principal Pl	ace of Busino	2a. Maili	2a. Mailing Address				4. FEI Number	A	Applied For		
21	<del></del>	26					65-0472497		lot Applicable	<u>.</u>	
Sulte, Apt.	#, <b>e</b> tc.	27					5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	9		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip		Country	Zip	<del></del>				8. This corporation owes or has paid the			-
24	25		29	30				Personal Property Tax due June 30.		' ' l	
		and Address of Curre	nt Registered	Agent				10. Name and Address of New Register	ed Agent		]
KOWALCZYK, WILLIAM A						81 Name					1
FORT LAUDERDALE FL 33312						82	Street Add	s (P.O. Box Number is Not Acceptable)			
						83	<del>.</del>			-	
						84	City		. 85 Zip	Code	4
2.5							Oily	F	L		╛
office or re	egistered age	ons of Sections 607.05 ont, or both, in the Stati h, and accept the oblic	e of Florida Su	ich change was	authorize	d by	the corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	e of changing appointment a	its registered s registered	
	in ignitities avic	n, and though the orang	jemento en esse	1011 001 10000, 1	ionica bia	idioo					
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Age							nt signature requ				4
12.	70	OFFICERS AN	ID DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS A			36
TITLE	-	ZYK, WILLIAM A		☐ DELETE	1.1 1				L Change	Addition	5
NAME Street address	2531 NA		1.2 N			ADDRESS				ફે	
CITY-ST-ZIP	FORT LA	12				ł				Š U	
TITLE	, , , , , , ,			DELETE 2.1T			1-211		☐ Change	Addition	
NAME				2.2 N					_ •		
STREET ADDRESS			238			ADDRESS					
CITY-ST-ZIP						ST-ZIP	•				
TITLE				☐ DELETE	3.1 T	TLE			Change	Addition	П
NAME					3.2 N	AME					
STREET ADDRESS					3.3 S	TREET	ADDRESS				
CITY-ST-ZIP		<del> </del>		T priete	_		ST-ZIP		1 0	111 4440	_
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NAME					4.21		4000000				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP TITLE				DELETE	5.1 T	ITY-S	1-ZIP		☐ Change	Addition	Η.
NAME					5.2 N						
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						ITY-S					
TITLE				DELETE	6.1 T				☐ Change	☐ Addition	,
NAME					6.2 N				-		
STREET ADDRESS					ı		ADDRESS				
CITY-ST-ZIP							T-ZIP				
	ertify that the	information supplied v	vith this filing o	loes not qualify				Section 119.07(3)(i), Florida Statutes. I furthe	certify that th	e information	7

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of 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 altachment with an address.

11 Landers/ HIREOF 984