FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
1995 MAR -9 AM 7:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000030534

1. Corporation Name
AYEN A/C & REFRIGERATION INC.

300001426213
-03/10/95--01041--022
****208.75 ****208.75

DO NOT WRITE IN THIS SPACE.

Principal Place of Business / Mailing Address
1623 N. MAGNOLIA AV
OCALA, FL 34475

3. Date Incorporated or Qualified: 20 APR 94
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-3236354 — Applied For / Not Applicable
5. Certificate of Status Desired: X — $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
MILO AYEN
3818 SE 3RD Street
OCALA, FL 34470-3004

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 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: Milo A Ayen
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when resigning) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	1.1 TITLE	☐ Change ☐ Addition
NAME	MILO A. AYEN	1.2 NAME	
STREET ADDRESS	3818 S.E. 3RD ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA, FL 34470-3004	1.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT	2.1 TITLE	☐ Change ☐ Addition
NAME	BARBARA J. AYEN	2.2 NAME	
STREET ADDRESS	2017 NW 44th PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA, FL 34475	2.4 CITY-ST-ZIP	
TITLE	SECRETARY	3.1 TITLE	☐ Change ☐ Addition
NAME	BARBARA J. AYEN	3.2 NAME	
STREET ADDRESS	2017 NW 44th PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA, FL 34475	3.4 CITY-ST-ZIP	
TITLE	TREASURER	4.1 TITLE	☐ Change ☐ Addition
NAME	MILO A AYEN	4.2 NAME	
STREET ADDRESS	3818 S.E 3RD ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA, FL. 34470-3004	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

DOA 3-9

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)(j), 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: Milo A Ayen / President — Title
MILO A AYEN
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNIFIED OFFICER OR DIRECTOR

904 351 3723
Daytime Phone #