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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000051836 (1) 1. Corporation Name

REFRIGERATION ENGINEERING & MANUFACTURING, INC.

Principat Place 7115 MIAMI N-27	of Business LAKES DRIVE	Mailing Address 7115 MIAMI LAKES DRIV			
MIAMI FL 33	3014	MIAMI FL 33014		3. Date Incorporated or Qualified 3a. 0 07/05/1995	Pale of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26 P.O. BOX 560	67	65-0604626	Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
2 City & State	AND WIND	Crty & State		6. Election Campaign Financing	\$5.00 May Be
3		28 HLALEAH. F	L	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for iritangible	e tax under s 199.032,
4	25		30	Florida Statutes X Yes No	
	9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
MANTE	** DAIN				
	is, raul Iiami lakes drive		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
7115 M N-27	INMI PAVES DUISE		83		
	FL 33014		84 City		. 85 Zip Code
1110 4711			64 City	F	-L 83 25 0006
SIGNATURE	Signature, typed or printed hairle of recipitors for OFFICERS	AND DIRECTORS DELETE	Hege bared Ager I September 1 og ut 4 13. 1 1 Till E	of when rendstoring DA* ADDITIONS/CHANGES TO OFFICERS A	
NAME	MONTES, RAUL		1 2 NAME		
STREET ADDRESS	7115 MIAMI LAKES DR.	N-27	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33014		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	2 4 CIFY - ST - ZIF' 3 1 TITLE		Change Addition
TITLE NAME			32 NAME		<u> </u>
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34 CiTY ST-ZIP		
TITLE		DELETE	4 1 Title		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C(TY-ST-Z)P		☐ DELETE	4.4 CITY - ST - ZIF 5 1 TITLE		Change Addition
TITLE			5.2 NAME		□ as □ > 0000mm
NAME STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - 7:P		
TITLE		DELETE	6 1 117LE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	_		6.3 STHEET ADDRESS		
CITY-ST-ZIP		1	6 4 CITY - ST - ZIP		
14. I do hereb certify that oath; that	y certify that the information supp tithe information indicated on this I am an officer or director of the Block 12 or Block 11 in changed	lied with this filing it voluntarily furnist annual report or supplemental annua orgination or the leading of trustee (good an attagrinent with an addres	I report is true and accur empowered to execute tr	for the exemption stated in Section 119.07(3)/kl ate and that my signature shall have the same I is report as required by Chapter 607, Florida S	. Florida Statutes. I further agal effect as if made under latutes; and that my name

SIGNATURE: _

SONATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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