

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

FILED

**May 09 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000062035 (7)
1. Corporation Name
B & L AIR CONDITIONING & REFRIGERATION, INC.



Principal Place of Business 8227 MANDARIN BLVD LOXAHATCHEE FL 33470	Mailing Address 8227 MANDARIN BLVD LOXAHATCHEE FL 33470-2903
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/10/1995	3a. Date of Last Report 05/01/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0601495		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KRAVITZ, BRUCE I 11440 OKEECHOBEE BLVD SUITE 219 ROYAL PALM BEACH FL 33411				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. <i>Suite 219</i>			
				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: *Bruce Kravitz* **Bruce Kravitz** DATE: **4/29/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BRADLEY, BRAD L			1.2 NAME			
STREET ADDRESS	8227 MANDARIN BLVD.			1.3 STREET ADDRESS			
CITY - ST - ZIP	LOXAHATCHEE FL			1.4 CITY - ST - ZIP			
TITLE	S	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BRADLEY, LINDA			2.2 NAME			
STREET ADDRESS	8227 MANDARIN BLVD.			2.3 STREET ADDRESS			
CITY - ST - ZIP	LOXAHATCHEE FL			2.4 CITY - ST - ZIP			
TITLE	T	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	BRADLEY, LINDA			3.2 NAME			
STREET ADDRESS	8227 MANDARIN BLVD.			3.3 STREET ADDRESS			
CITY - ST - ZIP	LOXAHATCHEE FL			3.4 CITY - ST - ZIP			
TITLE	<i>Asst. Secretary</i>	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	Bruce I Kravitz			4.2 NAME			
STREET ADDRESS	11440 Okeechobee Blvd #219			4.3 STREET ADDRESS			
CITY - ST - ZIP	Royal Palm Beach, FL 33411			4.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				6.4 CITY - ST - ZIP			

14. I do 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 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: *Bruce Kravitz* **Bruce Kravitz** DATE: **4/29/97** DAYTIME PHONE #: **561-755-5373**
(NOTE: Registered Agent signature required when reinstating)

CR2E034 (9/96)