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

P95000074103 (9)

DOCUMENT # 1. Corporation Name B & K AIR CONDITIONING & REFRIGERATION, INC.

Mailing Address Principal Place of Business 4465 CRESTWOOD DRIVE NORTH 4465 CRESTWOOD DRIVE NORTH

SI. PETENSBU	ING PL 33/14	OI. FEIEIIODONO TE O	V. 1 1								
						3.	Date Incorporated or Qualified 09/26/1995	3a. Date	of Last Rep	port	
2. Principal Pla	ce of Business	2a, Mailing Address				4.	, FEI Number		K 10.	oplied For	
1								ot Applicable			
Suite, Apt. #	, etc.	Surie, Apt. #, etc.			5	. Certificate of Status Desired			Additional equired		
City & State		City & State				6	. Election Campaign Financing	—	\$5.00	May Be	
City & State					Trust Fund Contribution		Added	to Fees			
Zip	Country	28	Cour	itry		8	. This corporation has liability for		ax under s	199.032,	
1	25	29	30					s 🔲 No			
1	g. Name and Address of Current		_ ,,			10	Name and Address of New	legistered	Agent		
				81	Name						
WALLED	IOUN I ESO		ŀ		0	-1/	2.0. Box Number is Not Accepta	ble)			
WALLER, JOHN L ESQ 467 SECOND AVENUE NORTH					82 Street Address (P.O. Box Number is Not Acceptable)						
				83							
SI. PEIL	RSBURG FL 33701								1	0	
1				84	City			FI	85 Zip	Code	
,	o the provisions of Sections 607,0502						- 6 - 4 - this statement for the p	rocco of ch	anging its re	adistered offic	
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2.	PT OFFICERS AND	TT DELETE	1 1	TI E				3	Change	Addition	
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NAME	MCDOWELL, KARON	DT: 1	2 2 N								
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14. If 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)(k). 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 certify that I am an officer or director of this 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 13 or Block 13 if changed, or on an attachment with an address

6.3 STREET ADDRESS

6.4 CHY - \$1 - ZIP

SIGNATURE:

STREET ADDRESS