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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

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CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

I do hereby certify that the information indicated on this are I am an officer or director of the appears in Block 12 or Block 13

13 if change

TITLE NAME

DOCUMENT # P96000019581 (3)

A-BEAR REFRIGERATION SERVICES, INC.

Principal Place of Business Mailing Address 6116 REGINA PL 6116 REGINA PL LAND O'LAKES FL 34639 LAND O'LAKES FL 34639-2902 3. Date Incorporated or Qualified 3a. Date of Last Report 02/29/1996 2. Principal Place of Business 2a. Mailing Address F£I Number Applied For 59 - 3365065 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 5. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zø 8. This corporation has liability for intangible tax under s. 199,032, Yes No 25 30 Florida Statutes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RIVERA, JORGE L JR 6116 REGINA PL Street Address (P.O. Box Number is Not Acceptable) 82 LAND O'LAKES FL 34639 83 84 City 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** Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 96/6) 12. 13. Change DELETE Addition TITLE 1.1 THUE RIVERA, JORGE L JR NAME 1.2 NAME 6116 REGINA PL STREET ADDRESS 1.3 STREET ADDRESS LAND O'LAKES FL 34639 CITY-ST-ZIP 1.4 CITY-\$1-7IP DELETE 2111111 Addition TITLE NAME RIVERA, WALTER A 22 NAME 9617 N 46TH ST STREET ADDRESS 2 3 STREET ADDRESS **TAMPA FL 33617** CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ Change Addition DELETE TITLE 3.1 THLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34639 CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CH Y - S1 - ZIP

ied with this filing dons not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the i supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that or the receiver or trustee encowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

, or on an attachment with **an** address.