

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

FILED
Jul 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000077100 (0)
 1. Corporation Name
ADVANCED REFRIGERATION & AIR CONDITIONING, INC.



Principal Place of Business HIGHWAY 19 SOUTH PERRY FL 32348	Mailing Address POST OFFICE BOX 716 PERRY FL 32348
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 #3 Skipper Ave Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 2336 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 08/28/1997	
22		27		4. FEI Number 62-1716787 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
23 City & State H. Walton Beach		28 City & State H. Walton Beach		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip USA		29 Zip USA		30 Country USA	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**KELLAR, TIMMY L
 HIGHWAY 19 SOUTH
 PERRY FL 32348**

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code **FL**

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 provisions of, Section 607.0505, Florida Statutes.
 SIGNATURE: *[Signature]* DATE: **5/16/98**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KELLAR, TIMMY L	
STREET ADDRESS	POST OFFICE BOX 716 n/a	
CITY-ST-ZIP	PERRY FL 32348	
TITLE	President	<input type="checkbox"/> DELETE
NAME	Howard L. Tucker, Jr.	
STREET ADDRESS	93 Keith Jeter Rd	
CITY-ST-ZIP	Hattiesburg, MS 39401	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kellar, Timmy L	
1.3 STREET ADDRESS	P.O. Box 716 n/a	
1.4 CITY-ST-ZIP	Perry, FL 32348	
2.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Howard L. Tucker, Jr.	
2.3 STREET ADDRESS	93 Keith Jeter Rd	
2.4 CITY-ST-ZIP	Hattiesburg, MS 39401	
3.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Vincent Bayles	
3.3 STREET ADDRESS	10 Marlborough Rd	
3.4 CITY-ST-ZIP	Shalimar, FL	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	300002582513	
6.3 STREET ADDRESS	-07/08/98--01016--012	
6.4 CITY-ST-ZIP	***150.00	

14. I 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: *[Signature]*

CR2E034 (10/97)