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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

S & S REFRIGERATION, INC.

## **FILED** May 14 1998 8:00am Secretary of State

Principal Place 3126 LEON F JACKSONVILI US	RD.	Mailing Address  POST OFFICE BOX 855: POST OFFICE BOX 855: JACKSONVILLE FL 3223 US	,		DO NOT WRITE IN THIS SI  3. Date Incorporated or Qualified  06/12/1991	PACE	
2. Principal Pi	ace of Business	2a. Mailing Address		···-	4. FEI Number	Appl	ied For
21		26			59-3070991	Not /	Applicable
Suite, Apt.		Suite, Apt. #, etc.			Certificate of Status Desired     Section		
City & State	9	City & State	_		6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the curre		gible
4	25	29	30			Yes 🔲	No
Name and Address of Current Registered Agent     SANCHEZ, LARRY				81 Name	10. Name and Address of New Registered A	gent	
JĀ	29 TOWNSEND BLVD X FL 32217			83 City	dress (P.O. Box Number is Not Acceptable)	85 Zip Co	[
office of re agent. I ar	o the provisions of Sections 607.0502 egistered agent, or both, in the State of landiar with, and accept the obligat	and 607.1508, Florida Statut of Florida. Such change was a lions of, Section 607.0505, Florida	es, the ac authorized orida Stati	ove-named corporates.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	changing its in intment as re	registered gistered
SIGNATURE MANY MULLI LAND			rySi	inchia	DATE	178	
12,	Prediure, typed in pointed name of registering about OFFICERS AND		13.	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 12
TITLE	PC	DELETE	1.1 10	F		Change	Addition
NAME	SANCHEZ, LARRY	<del></del>	1.2 NA	MF	`		
STREET ADDRESS	2929 TOWNSEND BLVD.			REET ADDRESS			İ
CITY-ST-ZIP	JACKSONVILLE FL 32277			Y-ST-ZIP			()
TITLE	7	DELETE	2.1 TIT			Change	Addition
NAME	SANCHEZ, LARRY JR.		2.2 NA	ME	•	<u> </u>	-
STREET ADDRESS	ESS 899 DUSKIN DR.		2.3 \$11	REET ADDRESS			1
CITY-ST-ZIP	JACKSONVILLE FL 32216		2. 4 CJ	ry-ST-ZIP			J
TITLE	S	DELETE	3.1 TIT			Change	Addition
NAME	FRAME, ERIC		3.2 NA	ME			[
STREET ADDRESS	899 DUSKIN DR.		3 3 ST6	REET ADDRESS			1

6.4 CITY-ST-ZIP 14. Thereby 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 or an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - ST - ZIP

3.4. CITY - ST - ZIP

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-SY-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

JACKSONVILLE FL 32216

Change

Addition

Change Addition

Change Addition