

of Rhode Island and Providence Plantations

## partment of State - Business Services Division

Annual Report for the year:

Corporation

→ Filing period: January 1 - March 1 → Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fe	ee if form is not fil	led by April 1.			_		
1. Entity ID Number	2. Exact name of the Corporation						
14419	National Refrigeration, Inc.						
3. Principal Office Address			City		State	Zip	
3600 West Shore Road			Warwick		RI	02886	
4. NAICS Code	Brief description of the character of business conducted in Rhode Island						
23 8 2 2	HVAC & Plumbing Constructing & Services						
5. State of Incorporation	1						
Rhode Island	[						
7. List ALL officers (names and add	resses)			Check th	e box to in	dicate an attachment [	
President Name Jack F. King, Sr.			Vice-President Name Brian Oliva and Jack King, Jr.				
Street Address 3600 West Shore Road			Street Address 3600 West Shore Road				
City Warwick	State RI	<sup>Zip</sup> 02886	City Warwick		State RI	Zip 02886	
Secretary Name Jack King, Jr.			Treasurer Name Jack F. King, Sr.				
Street Address 3600 West Shore Road			Street Address 3600 West Shore Road				
City Warwick	State RI	<sup>Zip</sup> 02886	Cily Warwick	<del></del>	State RI	<sup>Zip</sup> <b>0288</b> 6	
8. List ALL directors (names and ac	ddresses)			Check th	e box to ir	ndicate an attachment [	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
Director Name	•		Director Name		<u>.</u>		
Street Address			Street Address				
City	State	Zip	City		State	Zip	
9. Shares Authorized		Shares Issued					
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES		PAR VALUE	
		100		Class A Voting		\$.01	
		9900		Class A Nonvoting		\$.01	
<ol> <li>This report must be executed o trustee, this report must be execute</li> </ol>	n behalf of the cor	poration by an a	uthorized represe	entative. If the corpora	ition is in t	he hands of a receiver	
Under penalty of perjury, I declar	re and affirm that	t I have examine	d this report, in		anying so	chedules and	
statements, and that all statements. Name of Authorized Representative	nts contained he					<del></del>	
Jack F. King, Jr., Vice-President	•				Date	3-18	
Signature of Authorized Represent	ative /	<u> </u>			1		
	11 -0	SIGN DOC	DUMENT HERE	FILED			
MAIL TO:	10						
Division of Business Services 148 W. River Street, Providence, Rhode	Island 02904-2615			FEB 2 6 2018	~ ~		
Phone: (401) 222-3040							
Website: www.sos.n.gov			BY	- 4 DIL L	المستملسا	UNIVI 630 - Kevised: 10/2	