

2520005097648

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Pension and Welfare Benefits Administration
P.O. Box 75212
Washington, D.C. 20013-5215

JAN 7 1993

Dear Sir or Madam:

Pursuant to the provisions of Department of Labor Regulations at 29 CFR §2520.104-23, you are hereby notified that the employer identified in Item 1 below maintains a plan [plans] primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees. Item 2 below sets forth the approximate number of participants in each plan as of the date of this letter.

1. Name, address, Employer Identification Number of employer maintaining plan

ATLANTIC VENTILATING & EQUIP.CO.INC.
25 Sebeth Drive
Cromwell, Ct. 06416
06-0802852

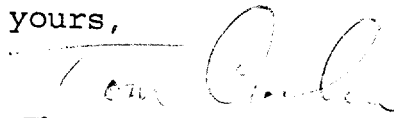
2. Number of participants in each plan to which this notification applies

Plan Number	Number of Participants
#1	1
#2	1
#3	1
#4	1

I am enclosing a check for \$1,000 made payable to the U.S. Department of Labor for payment of the penalty for the late filing of this registration statement pursuant to the notices issued by the Pension and Welfare Benefits Administration of the Department of Labor on March 23, 1992, and July 24, 1992.

Please date-stamp the enclosed copy of this letter and return it to me in the stamped self-addressed envelope provided.

Very truly yours,



[Employer] Thomas Cosker, President
ATLANTIC VENTILATING &
EQUIPMENT COMPANY

Enclosure
cc: Attorney
CPA

201964

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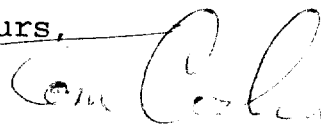
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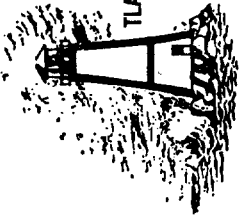


[Employer] Thomas Cosker, President
ATLANTIC VENTILATING &
EQUIPMENT COMPANY

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cc: Attorney
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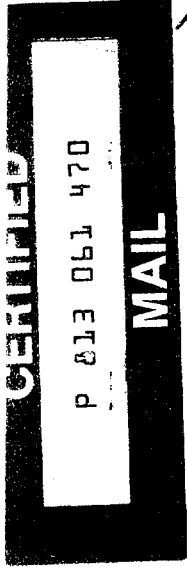
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20,964



ATLANTIC VENTILATING & EQUIPMENT CO.
25 SEBETHE DRIVE
CROMWELL, CONN. 06416

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REQUESTED**



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P 013 061 470

MAIL



HARTFORD CT 061 #11 12 1992 21:00

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