

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844009

FILED
Apr 01, 2008
Secretary of State

Entity Name: TRANSFRESH CORPORATION

Current Principal Place of Business:

950 E BLANCO RD
SALINAS, CA 93901 US

New Principal Place of Business:

Current Mailing Address:

250 E FIFTH ST
CINCINNATI, OH 45202 US

New Mailing Address:

FEI Number: 94-1620943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LUGG, JAMES R
Address: 950 E BLANCO RD
City-St-Zip: SALINAS, CA 93901 US

Title: S () Delete
Name: THOMPSON, JAMES E
Address: 250 E 5TH ST
City-St-Zip: CINCINNATI, OH 45202 US

Title: V () Delete
Name: BRADLEY, JOSEPH W
Address: 250 E FIFTH ST
City-St-Zip: CINCINNATI, OH 45202 US

Title: T () Delete
Name: TSACALIS, WILLIAM A
Address: 250 E 5TH ST
City-St-Zip: CINCINNATI, OH 45202 US

Title: V () Delete
Name: VIVIANI, TANIOS
Address: 950 E BLANCO RD
City-St-Zip: SALINAS, CA 93912 US

Title: V () Delete
Name: ZALLA, JEFFREY M
Address: 250 E FIFTH ST
City-St-Zip: CINCINNATI, OH 45202 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: VIVIANI, TANIOS
Address: 950 E BLANCO RD.
City-St-Zip: SALINAS, CA 93901 US

Title: D (X) Change () Addition
Name: KOCHER, BRIAN
Address: 250 E FIFTH ST
City-St-Zip: CINCINNATI, OH 45202 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES LUGG

P

04/01/2008

Electronic Signature of Signing Officer or Director

_____ Date