

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

FILED
Mar 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # S43611 (0)

1. Corporation Name
FLORIDA PLANTATION COLD STORAGE, INC.



Principal Place of Business

**501 NE 183RD ST
 MIAMI FL 33179
 US**

Mailing Address

**501 NE 183RD ST
 MIAMI FL 33179-4529
 US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**LOVING, JACK R
 1323 SE 3RD AVE
 SUITE 200
 FT LAUDERDALE FL 33316**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date incorporated or Qualified
04/08/1991

3a. Date of Last Report
04/03/1996

4. FID Number
65-0253288

Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.050(2) and 607.110(1) 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 obligations of, Section 607.050(2), Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this report

Signature of the Agent or the person authorized to sign

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
PD
 NAME **SOPHER, ROBERT W**
 STREET ADDRESS **501 NE 183RD ST**
 CITY- ST- ZIP **MIAMI FL**

TITLE DELETE
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 CITY- ST- ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY- ST- ZIP Change Addition

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY- ST- ZIP Change Addition

TITLE Change Addition
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY- ST- ZIP Change Addition

14. I do hereby certify that the information reported with this filing does not qualify for the exemption stated in Section 193.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 registered trustee or power of attorney to execute this report, as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, Change or on an attachment with an address.

SIGNATURE

3/13/97

305-4657-7653

CR2E034 (9/96)