FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 268830 1. Entity Name IFCO Systems Zellwood, Inc. 02 DEC 31 PM 12: 09 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 6191 Jones Avenue 6829 Flintlock Road REINSTATEM Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zellwood, Florida Applied For Houston, Texas 59-1008750 Not Applicable Zip 32798 Country Zip 77040 Country USA \$8.75 Additional USA 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Capitol Corporate Services, Inc. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 1333 North Duval St. City Tallahassee 8. 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. title it applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible January 1 - May 1 Fee is \$150.00 Tax filing requirement and elects to do so. After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE President, Secretary and Sole Director TITLE CR2E034B (12/01) NAME Gayle Dalicandro NAME STREET ADDRESS 2300 West 13th St, Chicago, IL 60608 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Vice President TITLE NAME Mike Hachtman STREET ADDRESS 6829 Flintlock Road, Houston, TX 77040 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIE CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE TIDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this 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 attachment with an address, with pother like empowered.

Gayle Dalicandro, President

SIGNATURE:

FOR PROFIT CORPORATION

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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 incicated on this 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 receiver or trustee empawared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an analysis.

SIGNATURE:

Gayle Dalicandro, President

713-276-