

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # 275516 (3)  
1. Corporation Name  
SEABOARD COLD STORAGE, INC.



Principal Place of Business  
110 SOUTH 11TH STREET  
P. O. BOX 798  
TAMPA FL 33601

Mailing Address  
110 SOUTH 11TH STREET  
P. O. BOX 798  
TAMPA FL 33601

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified 11/07/1963  
3a. Date of Last Report 05/01/1995  
4. FEI Number 59-1030417  
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. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~KALISH, WILLIAM~~  
~~2700 BARNETT PLAZA~~  
~~TAMPA FL 33602~~

81 Name Jeremy E. Gluckman  
82 Street Address (P.O. Box Number is Not Acceptable) 707 N. Franklin Street  
83 9th Floor  
84 City Tampa FL 85 Zip Code 33602

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Jeremy E. Gluckman*  
Signature typed or printed name of registered agent and filed if applicable (multiple Registered Agents signature required when filing)

\$30/96  
JEN

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	GREENBAUM, ELLIOT M	110 SOUTH 11TH STREET	TAMPA, FL 00000	<input type="checkbox"/>
S	MINNER, ROBERT L	110 SO. 11TH ST.	TAMPA FL	<input type="checkbox"/>
TDV	GREENBAUM, LOIS	110 S 11TH ST	TAMPA, FL 00000	<input type="checkbox"/>
TD	GREENBAUM, LOIS	110 S 11TH ST	TAMPA, FL 00000	<input type="checkbox"/>
D	GREENBAUM, TOBA	110 S 11TH ST	TAMPA, FL 00000	<input type="checkbox"/>
D	KOGOD, SANDRA	110 S. 11TH ST.	TAMPA FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert L. Minner* ROBERT L. MINNER 4-30-96 813-229-7951  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)