

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 588874

FILED
Oct 10, 2008
Secretary of State

Entity Name: PORT EVERGLADES COLD STORAGE, INC.

Current Principal Place of Business:

3205 SE 19 AVENUE
PORT EVERGLADES, FL 33316 US

New Principal Place of Business:

Current Mailing Address:

302 PROGRESS RD
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-1933000 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SATERBO, STEPHEN
108 CAMPBELL DR
WINTER HAVEN, FL 33884 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: DAMITA DAVIS WREN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SATERBO, STEPHEN
Address: 108 CAMPBELL DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP () Delete
Name: SATERBO, BRYAN
Address: 149 WODEN WAY
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP () Delete
Name: SATERBO, JOHN
Address: 1 CYPRESS COVE RD
City-St-Zip: WINTER HAVEN, FL 33884

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:

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: DAMITA DAVIS WREN

Electronic Signature of Signing Officer or Director

CONT

10/10/2008

Date