

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90043 001 ***150.00

DOCUMENT # 826257

1. Corporation Name

UNITED STATES COLD STORAGE, INC.

Principal Place of Business

100 DOBBS LN., STE. 102
P.O. BOX 5460
CHERRY HILL NJ 08034-6996

Mailing Address

100 DOBBS LN., STE. 102
P.O. BOX 5460
CHERRY HILL NJ 08034-6996

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/28/1971

4. FEI Number

11-1618557

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BRIDGMAN, T.C.
STREET ADDRESS 100 DOBBS LANE, SUITE 102
CITY-ST-ZIP CHERRY HILL NJ

TITLE D
NAME SCOTT, E.J. R.
STREET ADDRESS SWIRE HOUSE, 59 BUCKINGHAM GATE
CITY-ST-ZIP LONDON SW

TITLE D
NAME SPOONER, JAMES SIR
STREET ADDRESS SWIRE HOUSE, 59 BUCKINGHAM GATE
CITY-ST-ZIP LONDON SWIE 6AJ EN

TITLE V
NAME SLAMON, J
STREET ADDRESS 2 CLARKS GAP COURT
CITY-ST-ZIP MEDFORD NJ

TITLE S
NAME WRIGHT, DONALD J.
STREET ADDRESS 727 CORNWALLIS DRIVE
CITY-ST-ZIP MT. LAUREL NJ

TITLE T
NAME OMINSKY, B
STREET ADDRESS 53 BROADACRE DRIVE
CITY-ST-ZIP MT LAUREL NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Harlan, Dave
1.3 STREET ADDRESS 100 Dobbs Ln., Suite 102
1.4 CITY-ST-ZIP Cherry Hill, NJ 08034

2.1 TITLE D
2.2 NAME Fitzpatrick, Patrick W.
2.3 STREET ADDRESS PO Box 2067, 2003 S. Cherry Avenue
2.4 CITY-ST-ZIP Fresno, CA 93721

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE VD
4.2 NAME Slamon, James
4.3 STREET ADDRESS 100 Dobbs Ln., Suite 102
4.4 CITY-ST-ZIP Cherry Hill, NJ 08034

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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 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, with all other like empowered.

SIGNATURE: Donald Wright

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/99

Date

(609) 354-8181

Daytime Phone #

CR2E034 (11/98)

0544568