2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826257

Entity Name: UNITED STATES COLD STORAGE, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 201 LAUREL RD STE 400, FOUR ECHELON PLAZA VOORHEES, NJ 08043 **New Mailing Address: Current Mailing Address:** 201 LAUREL RD STE 400, FOUR ECHELON PLAZA VOORHEES, NJ 08043 FEI Number: 11-1618557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition Name: HUGHES-HALLET, JAMES Name: SWIRE HOUSE 59 BUCKINGHAM GATE Address: Address: City-St-Zip: LONDON ENGLAND, EN City-St-Zip: PD Title: Title: () Delete () Change () Addition HARLAN, D.M. Name: Name: 201 LAUREL RD, FOUR ECHELON PLAZA Address: Address: VOORHEES, NJ 08043 City-St-Zip: City-St-Zip: () Delete Title: Title: VD. () Change () Addition SLAMON, J Name: Name: 201 LAUREL RD, FOUR ECHELON PLAZA Address: Address: City-St-Zip: VOORHEES, NJ 08043 City-St-Zip: Title: () Delete Title: (X) Change () Addition WRIGHT, DONALD J. ALDERFER, LARRY ASISSEC Name: Name: Address: 201 LAUREL RD, FOUR ECHELON PLAZA Address: 201 LAUREL RD, FOUR ECHELON PLAZA City-St-Zip: City-St-Zip: VOORHEES, NJ 08043 VOORHEES, NJ 08043 Title: T/S Title: () Delete () Change () Addition Name: OMINSKY, B Name: 201 LAUREL RD. FOUR ECHELON PLAZA Address: Address: City-St-Zip: VOORHEES, NJ 08043 City-St-Zip: Title: () Delete Title: () Change (X) Addition FITZPATRICK, PATRICK DIR. Name: Name: 2525 EAST NORTH AVENUE Address: Address: City-St-Zip: City-St-Zip: FRESNO, CA 93725 US

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: BARRY OMINSKY T/S 04/27/2009