

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jan 26, 2009
Secretary of State**

DOCUMENT# 857162

Entity Name: CIMCO REFRIGERATION INC.

Current Principal Place of Business:2502 COMMERCIAL PARK DR.
MOBILE, AL 36606**New Principal Place of Business:**2502 COMMERCIAL PARK DRIVE
MOBILE, AL 36606**Current Mailing Address:**2502 COMMERCIAL PARK DR.
MOBILE, AL 36606**New Mailing Address:**2502 COMMERCIAL PARK DRIVE
MOBILE, AL 36606

FEI Number: 63-0826297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: SEC () Delete
Name: RUSSELL, GUY
Address: 65 VILLIERS STREET
City-St-Zip: TORONTO, ONTARIO, XX M5A 3S1 CTitle: T () Delete
Name: PARAVI, ANNA
Address: 395 WEST 1100 NORTH
City-St-Zip: NORTH SALT LAKE, UT 840542621 USTitle: P () Delete
Name: MCLEOD, STEVE D
Address: 65 VILLIERS STREET
City-St-Zip: TORONTO, ONTARIO, XX M5A 3S1 CTitle: VP () Delete
Name: MERGULHAO, JOSE
Address: 2502 COMMERCIAL PARK DRIVE
City-St-Zip: MOBILE, AL 36606 USTitle: D () Delete
Name: OGILVIE, ROBERT M
Address: 3131 HIGHWAY 7 WEST, BOX 5511
City-St-Zip: CONCORD, ONTARIO, XX L4K 1B7 CTitle: D (X) Delete
Name: RILEY, TIMOTHY J
Address: 395 WEST 1100 NORTH
City-St-Zip: NORTH SALT LAKE, UT 84054 C**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: SEC (X) Change () Addition
Name: RUSSELL, GUY
Address: 65 VILLIERS STREET
City-St-Zip: TORONTO, ONTARIO, XX M5A 3S1 CTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: P (X) Change () Addition
Name: MCLEOD, STEVE D
Address: 65 VILLIERS STREET
City-St-Zip: TORONTO, ONTARIO, XX M5A 3S1 CTitle: () 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: CATHY GROZDANOVSKI

EA

01/26/2009

Electronic Signature of Signing Officer or Director

Date