

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCAION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
99 FEB 19 PM 2: 02

1. Name of Limited Partnership	1a. DOCUMENT # <b>A98000000590</b>
<b>SOUTH FLORIDA FREEZER PARTNERS, LTD.</b>	



Mailing Address <b>2900 N.W. 75TH STREET MIAMI FL 33147</b>	Principal Office Address <b>2900 N.W. 75TH STREET MIAMI FL 33147</b>	3. Date Formed or Registered <b>03/03/1998</b>	5a. Capital Contributions as Shown on record <b>\$2,000,000.00</b>
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date.
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation <b>FL</b>	
City & State	City & State	6. FEI Number <b>65-0819801</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	7. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
		8. Make check payable to: Dept of State (See reverse side for fee information) <b>526 25</b>	

9. Name and Address of Current Registered Agent <b>BREIT, RICHARD H 3111 STIRLING ROAD FORT LAUDERDALE FL 33312</b>
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10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable) <b>4100002789284</b>
Suite, Apt. #, etc. <b>-02/26/99--01108--010</b>
City <b>FL</b> Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, hereby certifies that the information furnished herein is true and correct for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) \_\_\_\_\_ DATE \_\_\_\_\_

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) <b>REFRIGERATED FACILITY CORP.</b>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>2900 N.W. 75TH STREET</b>	11b. City, State & Zip Code <b>MIAMI FL 33147</b>	11c. Registration/ Document Number <b>P98000020266</b>
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*SL*  
*2-24-99*

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE **2/17/99**

*JOHN J. Galviner*  
*President*

Typed or Printed Name of General Partner Signing Form \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

CR2E003 (12/98)