2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # F94000005955

1. Entity Name

NATIONAL COLD STORAGE, INC.



Principal Place of Business

2826 EAST OAKLAND PARK BLVD.

SUITE 300 FT LAUDERDALE, FL 33306 US Mailing Address

2826 EAST OAKLAND PARK BLVD. SUITE 300

FT LAUDERDALE, FL 33306

US

FILED Apr 13, 2007 08:00 AM Secretary of State



04062007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0520819

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324

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8.	. 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.	I am familiar with, and acc	ept
	the obligations of registered agent.		

SIGNATURE.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

40	OFFICERS AND PROPORTING
110. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRECTORS PD BIEGER JR., GILBERT L 2826 EAST OAKLAND PARK BLVD., SUITE 300 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD ROJAS, MARCO A 2826 EĄST OAKLAND BLVD., SUITE 300 FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEVY, FRED L 2826 EAST OAKLAND BLVD., SUITE 300 FT LAUDERDALE, FL
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U00000705652 04/23/07-80060-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MONATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTO

4/10/07

Daytime Phone #