2006 FOR PROFIT CORPORATION

May 04, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P03000026365 **ELECTRIFRIO INTERNATIONAL CORPORATION** Principal Place of Business Mailing Address 2435 N MIAMI AVE 2435 N MIAMI AVE MIAMI, FL 33127 MIAMI, FL 33127 04042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0771236 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE MEDINA, ALBERTO C 2435 N MIAMI AVE MIAMI, FL FL331-27 IN THIS SPACE 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 accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NCTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be 000000562492 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees 05/19/06-80058-005 150.00 After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10, TITLE MEDINA, ALBERTO C NAME 2435 N MIAMI AVE STREET ADDRESS MIAMI, FL 33127 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 strue 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 expowered 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 AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

changed, or on an attachmen

SIGNATURE:

FILED