

FILE NOW: FILING FEE AFTER MAY 1 IS \$660.00

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED May 14 1997 8:00am Secretary of State

DOCUMENT # P93000015915(0)

1. Corporation Name Refrigerated Container Miami, Inc.

Principal Place of Business 5055 NW 74th Ave. Miami, Fl 33166 Mailing Address P.O. Box 1519 LaPorte, Texas 77572

3. Date Incorporated or Qualified 03/02/1993 3a. Date of Last Report 05/01/96

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt #, etc. 26 Suite, Apt #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 26 29 30

4. FEI Number 65-0396407 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes [X] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Lorber, Alan R. 1140 Kane Concourse Bay Harbor Islands, Fl 33154

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include Joseph P. Cunningham, Rick J. Garcia, and Jimmy W. Patterson.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows 1.1-6.4 for additions or changes.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J.W. Patterson J.W. PATTERSON SEC/TRES 4/30/97 281-470-1925

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (9/96)