

FILE NOW: FILING FEE AFTER MAY 1 IS \$500.00

FILED

May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. M... Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000001244 (8)			
1. Corporation Name FLORIDA ATLANTIC INDEPENDENT REEFER SERVICE, INC			
Principal Place of Business 2033 MAIN STREET SUITE 600 SARASOTA FL 34237		Mailing Address 2033 MAIN STREET SUITE 600 SARASOTA FL 34237-8001	
2. Principal Place of Business 21 7516 1ST AVE W Suite, Apt. #, etc. 22 City & State 23 BRADENTON, FL Zip 24 34209 Country 25		2a. Mailing Address 26 7516 1ST AVE W Suite, Apt. #, etc. 27 City & State 28 BRADENTON, FL Zip 29 34209 Country 30	
9. Name and Address of Current Registered Agent BARTLETT, CHARLES J 2033 MAIN STREET SUITE 600 SARASOTA FL 34237			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I, the undersigned, being the officer or registered agent, or both, in the State of Florida, do hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, which requires me to file 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 explanation of the change.			
SIGNATURE: <u>Scott Lamar</u> SCOTT LAMAR Signature typed or printed name of registered agent and if applicable, if applicable (NOTE: Registered agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
TITLE: D ☒ DELETE			
NAME: BARTLETT, CHARLES J			
STREET ADDRESS: 2033 MAIN STREET, SUITE 600			
CITY- ST- ZIP: SARASOTA FL 34237			
TITLE: ☐ DELETE			
NAME: ☐ DELETE			
STREET ADDRESS: ☐ DELETE			
CITY- ST- ZIP: ☐ DELETE			
TITLE: ☐ DELETE			
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TITLE: ☐ DELETE			
NAME: ☐ DELETE			
STREET ADDRESS: ☐ DELETE			
CITY- ST- ZIP: ☐ DELETE			
14. I do hereby certify that the information supplied with this filing does not qualify for exemption indicated on this annual report or supplemental annual report is true and correct to the best of my knowledge and belief, and I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, which requires me to file 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 explanation of the change.			
SIGNATURE: <u>Scott Lamar</u> SCOTT LAMAR Signature typed or printed name of signing officer			



3. Date Incorporated or Qualified 01/04/1996	3a. Date of Last Report
4. FEI Number 65-0652810	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
10. Name and Address of New Registered Agent	
1. Name LAMAR, SCOTT	
2. Street Address (P.O. Box Number is Not Acceptable) 7516 1ST AVE W	
3. City BRADENTON	
4. State FL	
5. Zip Code 34209	
6. Signature of New Registered Agent <u>Scott Lamar</u>	
7. Date 4/30/97	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. Name	☐ Change ☒ Addition
2. Street Address (P.O. Box Number is Not Acceptable)	☐ Change ☐ Addition
3. City	☐ Change ☐ Addition
4. State	☐ Change ☐ Addition
5. Zip Code	☐ Change ☐ Addition
6. Signature of New Registered Agent	☐ Change ☐ Addition
7. Date	☐ Change ☐ Addition

CR2E034 (9/96)

Date: 4/30/97
Daytime Phone: 941 7618271