FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 05, 1999 8:00 am Secretary of State 05-05-1999 90217 041 ***150.00

| DOCUMENT # | P98000006877 |
|------------|--------------|
| _ 0 | |

Corporation Name

COLD STORAGE OF THE AMERICAS, INC.

| 0025 0 | TOTAL OF THE PARENCE | o, 110° | | | | | |
|---|---|----------------------------------|------------------------------|--------|---|--|--|
| Principal Place | e of Business | Mailing Address | | | | (| |
| 240 BRYAN RO | AD 44 A | 240 BRYAN ROAD | | | | | |
| DANIA FL 33004 | 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | Dania Fl 33004 | | | | DO NOT WRITE IN THIS SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed | |
| | | | | | | 01/22/1998 | |
| Dringing Di | ace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied For | |
| · · | ace of business | 26 | | | | (05 - 08/1/8 2 Not Applicable | |
| 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | _ \$8.75 Additional | | |
| 22 27 | | | | | 5. Certificate of Status Desired Fee Required | | |
| City & State City & State | | | | | | 6. Election Campaign Financing S5.00 May Be | |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip Country | | | | 8. This corporation owes the current year Intangible | |
| 24 | 25 | 29 3 | 0 | | | Personal Property Tax. ☐ Yes ☐ No | |
| | g. Name and Address of Curren | t Registered Agent | | , | | 10. Name and Address of New Registered Agent | |
| 0.634/ | VED DELODES | | { | 81 | Name | | |
| | YER, DELORES | | 1 | 82 | Street Addre | ss (P.O. Box Number is Not Acceptable) | |
| | BUSINESS PARKWAY | | | | | | |
| RUTA | AL PALM BEACH FL 33411 | | 18 | 83 | | | |
| | | | 1 | 84 | City | FL 85 Zip Code 3 | |
| 44 Pursuant | to the provisions of Sections 607.0502 | 2 and 607 1508. Florida Statutes | the abo | ove- | named corpo | visition submits this statement for the nursose of changing its registered | |
| 11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes. | | | | | | | |
| SIGNATURE | · | | | | | | |
| | Signature, typed or printed name of registered agen OFFICERS AN | | - | gent s | signature required | when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| 12. | D OFFICERS AIN | □ DELETE | 13. 1.1 TITL | F | | Abbitions/Changes to officers and bitteefolds in 12 ☐ Change ☐ Addition | |
| TITLE | SAWYER, DELORES | | 1.2 NAM | | | | |
| NAME | 230 BUSINESS PARKWAY | | | | ADDRESS | | |
| STREET ADDRESS | ROYAL PALM BEACH FL 33411 | | | | 1 | | |
| CITY-ST-ZIP TITLE | D | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | | ZIF | Change Addition | |
| 1 | SAWYER, DAVID | | 2.2 NAME | | | | |
| NAME OTDEET ADDDESS | 230 BUSINESS PARKWAY | | 1 | | ADDRESS | | |
| STREET ADDRESS | ROYAL PALM BEACH FL 33411 | 1 | | | | | |
| CITY-ST-ZIP | D | ☐ DELETE | 2. 4 CITY-ST-Z | | -zır | ☐ Change ☐ Addition | |
| NAME | PINKOWSKI, MICHAEL | _ | 3.2 NAME | | | | |
| STREET ADDRESS | 240 BRYAN ROAD | | 3.3 STREET | | ADDRESS | | |
| CITY-ST-ZIP | DANIA FL 33004 | | 3.4. CITY-5 | | | | |
| TITLE | Drught i E 99991 | ☐ DELETE | 4,1 TITLE | | - | Change Addition | |
| NAME | | _ | 4. 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET | | ADDRESS | | |
| CITY-ST-ZIP | • | | 4.4 CITY | | | | |
| TITLE | : | ☐ DELETE | 5.1 TITLE | | | Change Addition | |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | , | | 5.3 STR | REETA | ADDRESS | | |
| CITY-ST-ZIP | • | | 5.4 CITY | Y-ST- | -ZiP | <u></u> | |
| TITLE | | ☐ DELETE | 6.1 TITL | E | | ☐ Change ☐ Addition | |
| NAME | | | 6.2 NAM | Æ | | | |

CITY-ST-ZIP 14. 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS