


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000020266</b> 1. Entity Name REFRIGERATED FACILITY CORP.	
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Principal Place of Business 2900 N.W. 75TH STREET STE 208 MIAMI, FL 33147	Mailing Address 360 AVENUE P 3RD FLOOR NEWARK, NJ 07105
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03292007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0819800	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BREIT, RICHARD H  
3111 STIRLING ROAD  
FORT LAUDERDALE, FL 33312

**DO NOT WRITE  
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 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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GALIHER, JOHN J 30 HOAGLAND COURT BRIDGEWATER, NJ 08807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GIACOPELLI, JOHN C 900 PALISADES AVE APT #2105 FORT LEE, NJ 07024
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GIACOPELLI, RICHARD J 16 WOODLAND ROAD WOODCLIFF LAKE, NJ 07675
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCOTT, JOSEPH T 7 GREENWOOD RD. OLD TAPPAN, NJ 07675
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000728920  
05/08/07-80017-011 300.00

**DO NOT WRITE  
IN THIS SPACE**

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Edward Morales* Edward Morales  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/07

Date

(973) 820-4052

Daytime Phone #