2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State
03-22-2000 90016 031 ***150.00

DOCUMENT # P99000023783

1. Entity Name
TOTAL FRIO CORP.

Principal Place of Business
1378 N.W. 78th Avenue
Miami, Fl. 33126

Mailing Address

00042070

2. Principal Place of Business
8550 W. Flagler Street
Suite, Apt. #, etc.
#111
City & State
MiaMI, Fl.
Zip 33144 Country U S A

3. Mailing Address
8550 W. Flagler Street
Suite, Apt. #, etc
#111
City & State
Miami, Fl.
Zip 33144 Country U S A

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0908665
Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
GUTIERREZ, RENALDY J.
601 Brickell Key Dr.
Miami, Florida 33131

7. Name and Address of New Registered Agent
Name: Bart C. Vidal
Street Address (P.O. Box Number is Not Acceptable): 8550 W. Flagler Street #111
City: Miami, Fl. FL Zip Code 33144

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

SIGNATURE Bart C Vidal 3/13/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres/Sec Mirta Mercedes Miralles M.Fiorucci 45, Santa Rosa, Argentina	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assist Sec. Renaldy J. Gutierrez 601 Brickell Key Dr. MiaMI, Fl. 33131	XX Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/99)

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] Mirta M. Miralles, Pres. 2/27/00 305-553-7029
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR