

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F21000000130

**Entity Name:** COLD BOX EXPRESS, INC.**Current Principal Place of Business:**992 N. BRINDLEE MOUNTAIN PARKWAY  
ARAB, AL 35016**Current Mailing Address:**P.O. BOX 177  
ARAB, AL 35016 US**FEI Number:** 82-1595788**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAINE, JASON L  
204 S. MONROE ST.  
STE 201  
TALLAHASSEE, FL 32301 US*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | P                                   |
| Name            | MCDONALD, FOSTER                    |
| Address         | 992 N. BRINDLEE MOUNTAIN<br>PARKWAY |
| City-State-Zip: | ARAB AL 35016                       |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | S                                   |
| Name            | MULLIS, TOM                         |
| Address         | 992 N. BRINDLEE MOUNTAIN<br>PARKWAY |
| City-State-Zip: | ARAB AL 35016                       |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | CFO                                 |
| Name            | FREDRICKSON, IVOR                   |
| Address         | 992 N. BRINDLEE MOUNTAIN<br>PARKWAY |
| City-State-Zip: | ARAB AL 35016                       |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | DIRECTOR                            |
| Name            | THOMPSON, JACKIE                    |
| Address         | 992 N. BRINDLEE MOUNTAIN<br>PARKWAY |
| City-State-Zip: | ARAB AL 35016                       |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JACKIE THOMPSON**DIRECTOR****01/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date