2006 LIMITED LIABILITY COMPANY —ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000025767

1. Entity Name COOL WORKS, LLC

FILED Apr 24, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

720 ORTON AVENUE, STE. 104 FORT LAUDERDALE, FL 33304 720 ORTON AVENUE, STE. 104 FORT LAUDERDALE, FL 33304



04152006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 34-1991176 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AKOUL, YASSER 720 ORTON AVENUE, STE. 104 FORT LAUDERDALE, FL 33304

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	bove named entity submits this statement for the purpose of cha ligations of registered agent.	anging its registered office or registered agent, or both, in the Si	ate of Florida. I am familiar w	ith, and accept
SIGNATU	JRE	(NOTE: Registered Agent signature required when reinstating)	DATE	e
-	Filing Fee is \$50.00 Due by May 1, 2006			. 41
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME	MGRM AKOUL, YASSER A	- 1		

720 ORTON AVENUE, STE, 104 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33304 MGRM HILE AKOUL, DAISY R NAME STREET ADDRESS 720 ORTON AVENUE, STE. 104 CITY-ST-ZIP FORT LAUDERDALE, FL 33304 TITLE NAME STREET ADDRESS CITY-ST-7IP ME NAME STREET ADDRESS CITY-ST-ZIP me NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-20-06

Daylime Phone #