2007 FOR PROFIT CORPORATION . ANNUAL REPORT

DOCUMENT # P01000070388

Entity Name
 COOL AIRCO, INC.



Principal Place of Business

11206 NW 36TH AVENUE MIAMI, FL 33167 Mailing Address

C/O IVAN A. GOMEZ, P.A. 601 BRICKELL KEY DR, STE 507 MIAMI, FL 33131

FILED Apr 27, 2007 8:00 am Secretary of State

04-27-2007 90193 024 ***158.75

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No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1143981

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

3. Certificate of Status Desired

Fee Require

IAG CORPORATE SERVICES, INC.
601 BRICKELL KEY DR, STE 507
MIAMI, FL 33131

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 of printed name of registered agent and title it applicable.

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE ROBERTS, COLIN NAME STREET ADDRESS 1 COLOMBO CLOSE KINGSTON 6, JAMAICA, CITY-ST-ZIP TITI F NAME MARSTON, STEVEN 231 MARCUŚ GARVEY DR STREET ADDRESS KINGSTON II, JAMAICA, CITY-ST-ZIP STD TITLE ABRAHAM, GIA STREET ADDRESS 2188 ENSENADA TERRACE WESTON, FL 33327 CITY-ST-ZIP TITLE STEPHEN MACICALL NAME 6 Cantebury Mana STREET ADDRESS CITY-ST-ZIP Kingshm. 10, TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 attachnept with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Steven Marston, President 4116107

(35)371.9213