


2006 FOR PROFIT CORPORATION ANNUAL REPORT

Act #
 61500 FILED
 Feb 27, 2006 08:00 AM
 Secretary of State

DOCUMENT # P04000099285 - Reference #
 1. Entity Name
 COOLER, INC.



Principal Place of Business Mailing Address
 PO BOX 52-2498 PO BOX 52-2498
 MIAMI, FL 33152 US MIAMI, FL 33152 US



01122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 86-1110054 Not Applicable

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

6. Name and Address of Current Registered Agent
 LEGALZOOM NEVADA, INC.
 44 W. FLAGLER ST.
 SUITE 675
 MIAMI, FL 33130

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	MALAVENDA, GEORGE
STREET ADDRESS	PO BOX 52-2498
CITY-ST-ZIP	MIAMI, FL 33152
TITLE	SECR
NAME	LEE, BRIAN
STREET ADDRESS	PO BOX 52-2498
CITY-ST-ZIP	MIAMI, FL 33152
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 03/09/06-80064-011 150.00

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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: George Malavenda Date: 2/21/06 Daytime Phone #: 305 477 08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #