

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV -7 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000016827

1. Corporation Name

COOL WORLD SUPPLIES, INC.

Principal Place of Business

7491 NW 7TH ST  
MIAMI FL 33126  
US

Mailing Address

7491 NW 7TH ST  
MIAMI FL 33126  
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

02/22/1996

5. FEI Number

65-0643087

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	XIQUES, ALEXANDER	11257 SW 155 LANE	MIAMI FL
VP	SANDOVAL, SANDRA	7491 NW 7TH STREET	MIAMI FL 33126

8. Name and Address of Current Registered Agent

XIQUES, ALEXANDER I  
7491 NW 7TH STREET  
MIAMI FL 33127

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

CR2040 (8/02)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/2/02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/2/02 305-267-1792

**PIANELLI & ASSOCIATES, INC.**

1470-U NW 107<sup>TH</sup> AVE  
MIAMI, FL 33172  
305-477-3726  
305-392-2554

Monday, November 04, 2002

**TO: DIVISION OF CORPORATIONS  
ANNUAL REPORT/REINSTATEMENT SECTION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314-6327**

**RE: COOL WORLD SUPPLIES, INC.  
7491 NW 7<sup>TH</sup> ST  
MIAMI, FL 33126**

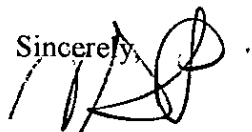
**DOCUMENT NO: P96000016827  
FED ID: 65-0643087**

To whom it may concern:

Enclosed please find a signed Application for Reinstatement please note that on August 02, 2002 a check was sent to your department Ck# 5420 in the amount of \$ 550.00 after speaking with you we discovered that your department dissolved this corporation because their 2002 Annual Report was not signed by the Corporate Officer on behalf of our client please expect our apology. We were also informed that in August 2002 you notified our client that their Annual Report had not been signed however they never received your correspondence.

If you have any questions you may contact us directly at the number listed above.  
Thanking you in advance for your prompt cooperation.

Sincerely,



Vanessa S. Pianelli  
**PIANELLI & ASSOCIATES, INC.**