FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 16, 1999 8:00 am
Secretary of State
04-16-1999 90078 028 ***158.75

DOCUMENT # 632317

1. Corporation Name

Floracool, Inc.

Principal Place of Business	Mailing Address
2261 N.W. 66th Avenue C260 Bld. 702 Miami, Florida 33126	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2261 N.W. 66th Ave.	2a. Mailing Address 26 P.O. BOX 523342	3. Date Incorporated or Qualifed 7/31/1979	
Suite, Apt. #, etc. 22 C260 Bld. 702	Suite, Apt. #, etc. 27	4. FEI Number 59-1934486	☐ Applied For ☐ Not Applicable
City & State 23 Miami, Int. Airport	City & State 28 Miami, Florida	5. Certifcate of Status Desired ☒	$8.75 Additional Fee Required
Zip / Country 24 33126 25 Dade	Zip / Country 29 33152 30 Dade	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation owes the current year Intangible Personal Property Tax.	☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C.T. Corporation System 1200 South Pine Island Rd. Plantation, Florida 33324	81 Name Myron H. Budnick 82 Street Address (P.O. Box Number is Not Acceptable) 16505 NE 26th Avenue 83 84 City Miami, Florida FL 85 Zip Code 33160

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Myron H Budnick 3/31/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CZYZYK, JOSEPH A 5456 MCCONNELL AVE LOS ANGELES CA 90066	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD FARACI, HECTOR 1840 N.W. 95th AVE. MIAMI FLORIDA 33172	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD AJER, RANDOLPH E 5456 MCCONNELL AVE LOS ANGELES CA 90066	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DS BUDNICK, MYRON H 16505 NE 26th AVE MIAMI FLORIDA 33160	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VERNIKOVSKY, ZACK 5456 MCCONNELL AVE LOS ANGELES CA 90066	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD KAHN, SEYMOUR 5456 MCCONNELL AVE LOS ANGELES CA 90066	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Myron H Budnick Sec. X 3/31/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #