## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K37768

Entity Name: ICE COLD AIR, INC.

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

28050 US HWY 19 N. 200 2ND AVENUE SOUTH

STE 405 STE 423

CLEARWATER, FL 33761 US ST PETERSBURG, FL 33701 US

Current Mailing Address: New Mailing Address:

28050 US HWY 19 N. 200 2ND AVENUE SOUTH

STE 405 STE 423

CLEARWATER, FL 33761 US ST PETERSBURG, FL 33701 US

FEI Number: 59-3025482 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSS, CARY
328 W. BEARSS AVENUE
SUITE A

ROSS, CARY
6987 EAST FOWLER AVE
TAMPA, FL 33617 US

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.

SIGNATURE: 04/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 VP
 ( ) Delete

 Name:
 DICKSON, ELIZABETH K

 Address:
 28050 US HWY 19 N. STE 405

 City-St-Zip:
 CLEARWATER, FL 33761

Title: P () Delete Name: HUGHES. ROBIN T

TAMPA, FL 33613 US

Address: 28050 US HWY 19 N. STE 405 City-St-Zip: CLEARWATER, FL 33761 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: DICKSON, ELIZABETH K
Address: 200- 2ND AVENUE SOUTH # 423
City-St-Zip: ST PETERSBURG, FL 33701

Title: P (X) Change ( ) Addition

Name: HUGHES, ROBIN T

Address: 200- 2ND AVE SOUTH # 423 City-St-Zip: ST PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH K DICKSON VP 04/18/2008