


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 03, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000009151 1. Entity Name SPOT COOLERS WEST, LLC	
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Principal Place of Business 444 E. PALMETTO PARK ROAD SUITE 200 BOCA RATON, FL 33432 US	Mailing Address 444 E. PALMETTO PARK ROAD SUITE 200 BOCA RATON, FL 33432 US
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01112005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4446215	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HRAWG CORP. 1801 N. MILITARY TRAIL SUITE 200 BOCA RATON, FL 33431	DO NOT WRITE IN THIS SPACE
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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

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SWANSON, KENNETH R 444 E PALMETTO PARK ROAD BOCA RATON, FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAGGE, GARTH T 444 E PALMETTO PARK ROAD BOCA RATON, FL 33432
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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Kenneth R. Swanson 2/5/05 561-394-0500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #