2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ANNUAL REPORT DOCUMENT # L01000009431

1. Entity Name
COOLED BY I.C.E., LLC

Principal Place of Business

Mailing Address

2033 MAIN ST., STE. 600 SARASOTA, FL 34237 2033 MAIN ST., STE. 600 SARASOTA, FL 34237

FILED Mar 22, 2004 08:00 AM Secretary of State



02232004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1117628	 -	Applied For
	_[Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional guired

6. Name and Address of Current Registered Agent

PFLUNGER, J. GEOFFREY 2033 MAIN ST., STE. 600 SARASOTA, FL 34237

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SIGNATURE.	Signature typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinsteling) DATE
F	iling Fee is \$50.00 ue by May 1, 2004	
9.	MANAGING MEMBERS/MANAGERS	
THILE NAME STREET ADDRESS CITY-ST-ZIP	MGR FETT, KATHLEEN 1380 FOX CREEK DRIVE SARASOTA, FL 34240	U00000094244 03/22/04-80051-014 50.00
TITLE NAME STREET ADDRESS CITY ST. ZIP		
THE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
THE NAME STREET ADDRESS CHY-ST-ZP		IN THIS SPACE
TITLE MAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby indicated	certify that the information supplied with this filling does not fon this report is true and accurate and that my signature st	qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes, I further certify that the information half have the same legal effect as if made under oath, that I am a managing member or manager of the

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