

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000022524

1. Entity Name
COOL PROPERTY HOLDINGS, LC



Principal Place of Business

11490 NW 39 ST
#102
MIAMI, FL 33178

Mailing Address

7255 SW 82ND AVE.
MIAMI, FL 33143



03242005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0650363

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

LICKSTEIN, FRED K ESQ.
100 S.E. 2ND STREET 17TH FLOOR
FOWLER WHITE BURNETT, P.A.
MIAMI, FL 33131

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

U000000303302
04/13/05-80106-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GOMEZ, JULIO
STREET ADDRESS	7255 SW 82ND AVE.
CITY- ST- ZIP	MIAMI, FL 33143
TITLE	MGR
NAME	GOMEZ, MARIA
STREET ADDRESS	7255 SW 82ND AVE.
CITY- ST- ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

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:

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

Date

Daytime Phone #

MARIA A GOMEZ

4/13/05

305-463-9998