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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # M80693**

(8)

FILED May 06 1997 8:00am Secretary of State

MASTER COOL, INC. Principal Place of Business Mailing Address 6341 N.W. 33RD WAY FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309-1655					
				3. Date Incorporated or Qualified 05/12/1988	3a. Date of Last Report 05/01/1998
	Place of Business	2s. Mailing Address		4. FEI Number 65-0052552	Applied For Not Applicable
Suite, Apt	t #, etc	26 Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ato	City & State		Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip 4	Country 25	Zip 29	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, XYes No
	9. Name and Address of Curr		1201	10. Name and Address of New R	
634	ARTIN, WILLIAM J. 41 N.W. 33RD WAY . LAUDERDALE FL 33309		81 Name82 Street Ac8384 City	ddress (P.O. Box Number is Not Accepta	85 Zip Code
Office or agent 1 SIGNATURE	Styriature, typed or printed name of registered a		as authorized by the corpo , Florida Statutes. INOTE: Registered Agent signature re	proporation submits this statement for the ration's board of directors. I hereby accending the reinstating of the ADDITIONS/CHANGES TO OFFI	DATE
THLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET ADDRESS	MARTIN, WILLIAM J. 6341 N.W. 33RD WAY FT. LAUDERDALE FL 33309		1.2 NAME 13 STREET ADDRESS		
HY-S1-7P ITEF	ST	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	MARTIN, NANCY		2.2 NAME		
TREET ADDRESS	6341 N.W. 33RD WAY FT. LAUDERDALE FL 33309		2.3 STREET ADDRESS		
ITY - ST - ZIP ITLE	FI. LAUDENDALE FL 33308	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
AME			3.2 NAME		•
IREET ADORESS	3		3.3 STREET ADDRESS		
TY-ST-ZIP			3.4. CITY - ST - ZIP	······································	
ITLE		☐ DELETE	4.1 TITLE		Change Addition
AME COLOT ACINOCOS			4. 2 NAME		
'REET AODRESS TY-\$1-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TeE		DELETE	5.1 TITLE		Change Additio
ME			5.2 NAME		-
TREET ADDRESS	5		5.3 STREET ADDRESS		
CITY - S1 - ZIP			5.4 CITY-ST-ZIP		
1LF		☐ DELETE	6.1 THLE	,	Change Addition
4ME			6.2 NAME		
IPEET ADORESS	5		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. I do 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.