2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2006 8:00 am Secretary of State

05-03-2006 90243 022 ***150.00 DOCUMENT # P00000059490 LION KING ELECTRIC COOL, INC. 20044129 Principal Place of Business Mailing Address 4011 W FLAGLER STREET 19811 SW 122 AVE MIAMI, FL 33177 404 MIAMI, FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272006 Cha-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 65-1018743 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GONZALEZ, LEONEL Street Address (P.O. Box Number is Not Acceptable) 19811 SW 122 AVE MIAMI, FL 33177 City Zip Code 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. | am familiar with, and accept the obligations of registered agent. SIGNATURÉ Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change Addition GONZALEZ, LEONEL NAME NAME STREET ADDRESS 19811 SW 122 AVE STREET ADDRESS MIAMI, FL 33177 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE VALDEZ, LAZARO R NAME NAME STREET ADDRESS 8729 NW 188 LANE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33165 CITY-ST-ZIF Addition ☐ Delete TITLE ☐ Change TITLE LABRADOR, ONASIS NAME NAME 552 SW 78 CT STREET ADDRESS STREET ADDRESS MIAMI, FL 33144 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition BRITO, ERNESTO NAME NAME STREET ADDRESS 19811 SW 122 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33177 ☐ Detete ☐ Change TITLE ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7/P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NA OF SIGNING OFFICER OR DIRECTO

786-262-4994