

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2003 8:00 am
Secretary of State

02-28-2003 90158 040 ***150.00

DOCUMENT # P00000065667

1. Entity Name
COLDIRE TECHNOLOGY, INC.



Principal Place of Business
177 OVERBROOK RD
CLEAR WATER FL 33777

Mailing Address
36181 EASTLAKE RD
141
PALM HARBOR FL 34685

10028811



2. Principal Place of Business
36181 Eastlake Rd

Suite, Apt. #, etc.
#141

3. Mailing Address

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Palm Harbor FL

City & State

4. FEI Number 59-3559405

Applied For
Not Applicable

Zip 34685 Country Pinellas

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MONFORT, EDWARD R
2112 SUNNYDALE BLVD., UNIT E
CLEARWATER FL 33765

7. Name and Address of New Registered Agent

Name
Monfort, Edward R
Street Address (P.O. Box Number is Not Acceptable)
36181 Eastlake Rd #141
City Palm Harbor FL Zip Code 34685

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 Edward Monfort 2/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P	MONFORT, EDWARD	36181 EAST LAKE RD #141 PALM HARBOR FL 34685				
	S	MONFORT, DAWN	36181 EAST LAKE RD #141 PALM HARBOR FL 34685				

12. 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 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: EDWARD MONFORT 2/20/03 727/530/3965
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)