

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

YEAR 2002

DOCUMENT # P01000019033

1. Entity Name

Koolmaxx Corp.

FILED

02 OCT 21 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

11821 SW 104 Terrace

3. Mailing Address

11821 SW 104 Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33186

Country

U.S.

Zip

33186

Country

U.S.

4. FEI Number

65-1076759

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Maximo Gherardi

Street Address (P.O. Box Number is Not Acceptable)

11821 SW 104 Terrace

City

Miami

FL

Zip Code

33186

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

10/14/02

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
Maximo Gherardi  
11821 SW 104 Terrace  
Miami, FL 33186

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
Alex Aguila  
10840 SW 68 Drive  
Miami, FL 33173

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
Nelson Gonzalez  
9425 SW 90 Street  
Miami, FL 33176

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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\*\*\*\*150.00 \*\*\*\*150.00

**DO NOT WRITE  
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/14/02 (305) 803-7427

Date

Daytime Phone #

October 14, 2002

Reference: Document # P01000019033

Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

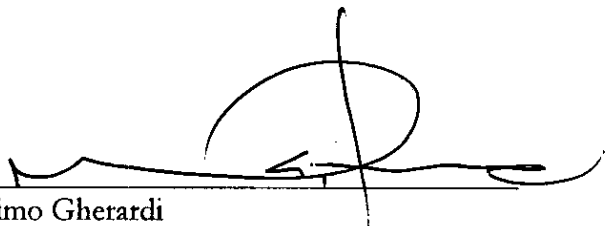
To Whom It May Concern:

SUBJECT: KOOLMAXX CORP.

We would like to take this opportunity to ask for a reinstatement of "Koolmaxx Corp.". This corporation was incorporated on February 21, 2001. We never received our preprinted UBR report in the mail. Furthermore, several changes in management and lack of knowledge with respect to the filing requirements in Florida worsened the problem. We respectfully ask for an abatement of the late filing penalty. We assure you this will never happen again. Enclosed please find our UBR report as well as a check for \$150.00.

We apologize for any inconvenience this has caused and would like to thank you for your time and attention to this matter. If you have any questions, please contact me at (305) 803-7427.

Sincerely,

x 

Maximo Gherardi  
President  
Koolmaxx Corp.

Enclosures (2)