

7/21

FILED
Aug 19, 2002 8:00 am
Secretary of State

07-28-2002 90174 040 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000112589

1. Entity Name
O2 COOL, INC.

Principal Place of Business
**1301 ADAMS STREET
 HOLLYWOOD FL 33019**

Mailing Address
**1301 ADAMS STREET
 HOLLYWOOD FL 33019**

41693



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1156161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SABRA, RICHARD ESO
 C/O ATKINSON DINER STONE ET AL
 1946 TYLER STREET
 HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

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

1301 Adams Street

City **Hollywood**

FL

Zip Code
33019

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 is applicable.

(NOTE: Registered Agent signature required when reinstating)

Date

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

FILE NOW!!! FEE IS \$550.00

**After September 13, 2002 Fee will be \$750.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDDLESTON, WILLIAM 1301 ADAMS STREET HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDDLESTON, KRISTI 1301 ADAMS STREET HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (4/02)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kristie Huddleston
 Signature and typed or printed name of signing officer or agent

Kristie Huddleston
 Date **7/22/02** (305) 937 3193
 Daytime Phone #

Attachment
PO1000112589/ [REDACTED] 41693
July 21, 2002

To whom it may concern,

I am writing you in regards to my filing fee. My corporation was formed late last year and thus is filing all taxes for the first time this year. Upon receiving forms of any kind, I immediately forward them to my accountant. I initially received this 2002 Uniform Business Report approximately 2 weeks ago and immediately inquired with my accountant as to the amount. I was told that the normal fee for a timely returned report is \$150.00.

I then called your office and was told to submit in writing a request for the late fee to be waived. That is why I am writing you now. I would appreciate your cooperation in this matter as I responded in what I thought was a timely manner. Obviously, the initial 2002 UBR never made it to my address. Please accept this \$150.00 check as payment in full.

Thank You,



William Huddleston, Director