FILED
Mar 01, 2004 8:00 am
Secretary of State
03-01-2004 90028 038 ***158.75

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000008064

1. Entity Name
COOL BEACH TANNING, INC.

54013054

Principal Place of Business	Mailing Address
3625 MARSH PARK COURT JACKSONVILLE BEACH, FL 32250	3625 MARSH PARK COURT JACKSONVILLE BEACH, FL 32250

02262004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
4130 So. Third Street Suite, Apt. #, etc.	4130 So. Third Street Suite, Apt. #, etc.
City & State: Jacksonville Beach, FL	City & State: Jacksonville Beach, FL
Zip: 32250 Country: USA	Zip: 32250 Country: USA

4. FEI Number: 55-0789358 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SAFER, ELIOT J
10110 SAN JOSE BLVD.
JACKSONVILLE, FL 32257

7. Name and Address of New Registered Agent

Name: Joanne Lyons
Street Address (P.O. Box Number is Not Acceptable): 4130 So. Third Street
City: Jacksonville Beach, FL Zip Code: 32250

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: Joanne Lyons 2-26-04
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, 2004 Fee will be $550.00

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	P	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Joanne Lyons 612 Camellia Ter. Dr. Neptune Beach, FL 32266	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Jennifer Lyons 612 Camellia Ter. Dr. Neptune Beach, FL 32266	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Miranda Lobs 10358 Olde Clydesdale Cir. Lake Worth, FL 33467	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Joanne Lyons 2-26-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Feb 26 04 07:11p Ned Jackson Inc 9043561755 p.1