

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000047744

Entity Name: COOL FEVER, INC.

FILED
May 09, 2007
Secretary of State

Current Principal Place of Business:

9022 NW 167 ST
MIAMI LAKES, FL 33018

Current Mailing Address:

9022 NW 167 ST
MIAMI LAKES, FL 33018

New Principal Place of Business:

801 S FEDERAL HWY
APT 417
POMPANO BEACH, FL 33062

New Mailing Address:

801 S FEDERAL HWY
APT 417
POMPANO BEACH, FL 33062

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMERO, LESBIA
9022 NW 167 ST
MIAMI LAKES, FL 33018 US

Name and Address of New Registered Agent:

SAVILLON, EDUARDO
801 S FEDERAL HWY
APT 417
POMPANO BEACH, FL 33062 US

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: EDUARDO SAVILLON

05/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROMERO, MARIO
Address: 9022 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33018

Title: VP (X) Delete
Name: SAVILLON, EDUARDO I
Address: 9022 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33018

Title: VP (X) Delete
Name: ROMERO, LESBIA
Address: 9022 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33018

Title: VP (X) Delete
Name: ARRIETA, MONICA
Address: 9022 NW 167 ST
City-St-Zip: MIAMI LAKES, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SAVILLON, EDUARDO
Address: 801 S FEDERAL HWY
City-St-Zip: POMPANO BEACH, FL 33062

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDUARDO SAVILLON

MRS

05/09/2007

Electronic Signature of Signing Officer or Director

Date