

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000077215

Entity Name: B COOL II INC

FILED
Apr 03, 2008
Secretary of State

Current Principal Place of Business:

6931 E. WEDGEWOOD AVE
DAVIE, FL 33331 US

New Principal Place of Business:

743 SHOTGUN RD
SUNRISE, FL 33326 US

Current Mailing Address:

6931 E. WEDGEWOOD AVE
DAVIE, FL 33331 US

New Mailing Address:

FEI Number: 20-1119206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONAWITZ, MARK T
6931 E. WEDGEWOOD AVE
DAVIE, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP/D () Delete
Name: BONAWITZ, MARK T
Address: 6931 E. WEDGEWOOD AVE
City-St-Zip: DAVIE, FL 33331 US

Title: P/D () Delete
Name: BONAWITZ, KENNETH J
Address: 12157 NATALIE COVE RD
City-St-Zip: COOPER CITY, FL 33330 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARK BONAWITZ

VP

04/03/2008

Electronic Signature of Signing Officer or Director

_____ Date