

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P04000149706</b> 1. Entity Name <b>KOOL SPOT INC.</b>				<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">05 NOV -7 PM 2:37</div> <div style="font-size: 1.1em;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</div>	
Principal Place of Business <b>6854 FORREST CITY RD. ORLANDO, FL 32810</b>		Mailing Address <b>6854 FORREST CITY RD. ORLANDO, FL 32810</b>		 <div style="font-weight: bold; font-size: 1.2em;">REINSTATEMENT 2005</div> <div style="font-size: 0.8em;">103120052 REINP CR2E098 (6/04)</div>	
2. Principal Place of Business <i>Same as above</i>		3. Mailing Address <i>1818 Mulberrywood Ct</i>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. <i>Orlando</i>			
City & State 		City & State <i>Florida</i>			
Zip 		Zip <i>32818</i>		4. FEI Number <i>30-1797715</i>	
Country 		Country 		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>YOUNG, ROBERT 6854 FORREST CITY RD. ORLANDO, FL 32810</b>				7. Name and Address of New Registered Agent Name <i>Lyndell L. Mims</i> Street Address (P.O. Box Number is Not Acceptable) <i>1818 Mulberrywood Ct</i> City <i>Orlando</i> <b>FL</b> Zip Code <i>32818</i>	
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 <i>Lyndell L. Mims</i> <i>President</i> <i>Oct 31-05</i> <small>Signature of registered agent or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After January 1, 2006, Fee will be \$300.00</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, ROBERT 6854 FORREST CITY RD. ORLANDO, FL 32810	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Lyndell L. Mims 1818 Mulberrywood Ct Orlando, Fla 32818	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400061622484 11/22/05--01036--012 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> 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"/> 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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>Lyndell L. Mims</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<i>Oct. 31-05-407-592-0707</i> <small>Date Daytime Phone #</small>		