

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010096

FILED  
Feb 01, 2008  
Secretary of State

Entity Name: CONSTANT COOLING, INC.

## Current Principal Place of Business:

20321 SW 122ND PLACE  
MIAMI, FL 33177 US

## New Principal Place of Business:

2909 SAN REMO CIRCLE  
HOMESTEAD, FL 33035 US

## Current Mailing Address:

20321 SW 122ND PLACE  
MIAMI, FL 33177 US

## New Mailing Address:

2909 SAN REMO CIRCLE  
HOMESTEAD, FL 33035 US

FEI Number: 20-4175778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COMMOCK, SHELLY-ANN  
20321 SW 122ND PLACE  
MIAMI, FL 33177 US

## Name and Address of New Registered Agent:

COMMOCK, SHELLY-ANN  
2909 SAN REMO CIRCLE  
HOMESTEAD, FL 33035 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:

02/01/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: COMMOCK, SHELLY-ANN  
Address: 20321 SW 122ND PLACE  
City-St-Zip: MIAMI, FL 33177 US

Title: VP D ( ) Delete  
Name: COMMOCK, OSMOND  
Address: 20321 SW 122ND PLACE  
City-St-Zip: HOMESTEAD, FL 33177 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: COMMOCK, SHELLY-ANN  
Address: 2909 SAN REMO CIRCLE  
City-St-Zip: HOMESTEAD, FL 33035 US

Title: VP D (X) Change ( ) Addition  
Name: COMMOCK, OSMOND  
Address: 2909 SAN REMO CIRCLE  
City-St-Zip: HOMESTEAD, FL 33035 US

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: OSMOND COMMOCK

VP

02/01/2008

Electronic Signature of Signing Officer or Director

Date