2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129531

Entity Name: COOL CREATIONS INC.

FILED Aug 05, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pl	New Principal Place of Business:	
BIN COYLE ST.			67/18 FORT DEPC	6748 FORT DEPOSIT DR	
PENSACOLA, FL 325024716				PENSACOLA, FL 325265116	
2110/100	27 (, 1 2 02002		1 2110/ (002) (, 12	020200110	
Current M	ailing Addres	s:	New Mailing Add	Iress:	
BIN COYLE ST.			6740 FODT DEDC	6748 FORT DEPOSIT DR	
	= 51. DLA, FL 325024	1716	PENSACOLA, FL		
2.10/100	.,		1 2110/1002/1,12	22233113	
El Number:	20-4258696	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Addre	ss of New Registered Agent:	
SPIEGEL 8	& UTRERA, P.A	4 .			
1840 SW 2					
ATH FLOC	R 33145 US				
VII/~(IVII, I ∟	33143 00				
	named entity s e of Florida.	submits this statement for the pu	rpose of changing its regis	tered office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not	receive the prior notice.		
		Trust Fund Contribution ().			
OFFICERS	S AND DIRECT	rors:	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS:	
Γitle:	PD ()	Delete	Title:	() Change () Addition	
Name:	SANDERS, MAL	JRENE R	Name:		
\ddress:	6748 FORT DEF	POSIT DRIVE	Address:		
City-St-Zip:	PENSACOLA, F	L 325265116	City-St-Zip:		
Γitle:	VD ()	Delete	Title:	() Change () Addition	
Name:	SANDERS, HAR		Name:	• • • • • • • • • • • • • • • • • • • •	
\ddress:	6748 FORT DEF		Address:		
City-St-Zip:	PENSACOLA, F	L 325265116	City-St-Zip:		
Γitle:	V ()	Delete	Title:	() Change () Addition	
Name:	SANDERS, SHE		Name:	() change () / taution	
Address:	6748 FORT DEF		Address:		
City-St-Zip:	PENSACOLA, F		City-St-Zip:		
Γitle:	S ()	Delete	Title:	() Change () Addition	
Name:	SANDERS, KAT		Name:	() Change () Addition	
\ddress:	6748 FORT DEF		Address:		
City-St-Zip:	PENSACOLA, F		City-St-Zip:		
Γitle:	т /\	Delete	Title:	() Change () Addition	
nue. Name:	T () SANDERS-PHIL	Delete	Name:	() Change () Addition	
vanie. ∖ddress:	6748 FORT DEF		Address:		
naaress. City-St-Zip:	PENSACOLA, F		City-St-Zip:		
Jity-Ot-Zip.	I LINGACOLA, F	L 020200110	Oity-3t-21p.		

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: HAROLD C SANDERS VD 08/05/2009