## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000051147

Entity Name: NEXCOLD, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10869 NW 46 DR.

CORAL SPRINGS, FL 33076

Current Mailing Address: New Mailing Address:

10869 NW 46 DR. 8715 SW 57TH STREET CORAL SPRINGS, FL 33076 FT. LAUDERDALE, FL 33328

FEI Number: 26-2774199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHEPPARD, RAY I. SHEPPARD, RAY I CEO 8715 SW 57 ST. 8715 SW 57 ST.

FT. LAUDERDALE, FL 333285929 US FT. LAUDERDALE, FL 333285929 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: RAY I. SHEPPARD 04/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOS ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 SHEPPARD, RAY I.
 Name:
 SHEPPARD, RAY I

 Address:
 8715 SW 57 ST
 Address:
 8715 SW 57 ST

City-St-Zip: FT. LAUDERDALE, FL 333285929 City-St-Zip: FT. LAUDERDALE, FL 333285929

Title: PCFO Title: () Delete (X) Change ( ) Addition FISCHLER, LOUIS M. Name: Name: FISCHLER, LOUIS M CFA 7341 AMBERLY LANE, #404 7341 AMBERLY LANE, #404 Address: Address: DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33446 City-St-Zip: City-St-Zip:

 Title:
 CTO () Delete
 Title:
 CTO (X) Change () Addition

 Name:
 SHEPPARD, BRIAN K. PHD
 Name:
 SHEPPARD, BRIAN K. PH.D.

Address: 10869 NW 46 DR. Address: 10869 NW 46 DR. Address: 10869 NW 46 DR.

City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: CORAL SPRINGS, FL 33076

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 FISCHLER, LOÚIS M. CFA
 Name:

 Address:
 7341 AMBERLY LANE, #404
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33446
 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: RAY I. SHEPPARD CEO 04/16/2009