## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 20 1998 8:00am

ANNUAL REPORT 1996		3 <i>5</i> <b>3</b> 3 7	ecretary of State  N OF CORPORATIONS	Secretary of State	
DOCUI 1. Corporation	MENT # P9300	0026596 (5)			
KOOL H	AND MIKES APP	LIANCE SERVICE	, INC.		
Principal Place of Business Mailing Address					
13390 SW 131st STREET #127					
MIAMI,	FLORIDA 331	86	•	3. Date Incorporated or Qualified 3	Date of Last Report
					4/30/97
2. Principal Pla	ace of Business	2e. Mailing Address	<del>, , ,,,,,, ,,, ,,,, ,,,,,,,,,,,,,,,,,</del>	4. FEI Number	Applied For
न		26		65-0434046	Not Applicable
Suite, Apt.	#, etc.	Sulte, Apt. #, et-	c.	5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Hequired
City & State	3	28 28 28 28 28 28 28 28 28 28 28 28 28 2		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Ζφ <b>29</b>	Country 30	8. This corporation has liability for intar Florida Statutes Yes	gible tax under s 199.032,
	9. Name and Address of	Current Registered Agent		10. Name and Address of New Regis	itered Agent
			81 Name		
GARNEAU, MICHAEL W. 82 Street Add				dress (P.O. Box Number is Not Acceptable)	
13390 SW 131st STREET #127					
MIAMI,	FLORIDA 331	86	83		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 6	07.0502 and 607.1508, Florida S	tatutes, the above-named corp	oration submits this statement for the purpose	·
or register	ed agent, or both, in the State	of Florida. Such change was aut of, Section 607.0505, Florida Sta	horized by the corporation's bo	eard of directors. I hereby accept the appointing	nent as registered agent. I am
SIGNATURE _	Signature Typed or printed hank of rugist	ereo agent and tite if approable	(NOTE: Registered Agent signature requ	rred whan reinstating)	DATE
12.		ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12
TITLE	P7D	DELETE	1. 1 TITLE		Change Addition
NAME	GARNEAU, MIC	HAEL W.	1.2 NAME		
STREET ADDRESS		st STREET #127	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI, FLORI	DA 33186 TI DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME		Dorre	2.2 NAME		C Greatific C Modition
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		Ì
TIFLE		DELETE	3. 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		ļ
CITY-ST-ZIP		DELETÉ	3.4 CITY - ST - ZIP		Change Addition
NAME			4.1 TITLE 4.2 NAME		— · ·- )
STREET ADDRESS			4.3 STREET ADDRESS	<b>900002532</b> -05/22/9801011	''> 글날   
CITY-ST-ZIP			4.4 CITY-ST-ZIP	-05/22/9801011	- Ugo /
TITLE		DELETE			Chapte    Addition
NAME	1		5.2 NAME		975/2x
STREET ADDRESS			5.3 STREET ADDRESS	<i>\\\\</i>	/400
CITY-ST-ZIP			5.4 CITY+S1-ZIP		
TITLE		☐ DELETE			Change Addition
NAME		·	6.2 NAME		ĺ
STREET ADDRESS	l		6.3 STREET ADDRESS		Į

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 13 traininged, or on an attachment with an address.

6.4 CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP