FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21 1998 8:00am Sandra B. Mortham Secretary of State Secretary of State

	·	1998		TEE.	DIVISION OF C	ORPOR	ATIO	DNS		2			
DOCUMENT # P9400033617 (9) COOL ZONE AIR CONDITIONING AND REFRIGERATION IN										L IRRONARIO DE DENNE REGEN BERNE BERNE BRANT DE GEN ANDRE HAND BENNE BENNE HARD HAND HAND			
ľ	Principal Place of Business Mailing Address												
	1003 NW 52 ST 1003 NW 52 ST FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309									n			
US US										DO NOT WRITE IN THIS SPACE			
										3. Date Incorporated or Qualified			
_	Principal Place of Business									05/03/1994			1
21	Principal Pi	incipal Place of Business			2s. Mailing Address					4. FÉI Number 65-0487378	· · · · · · · · · · · · · · · · · · ·	oplied For of Applicable	ł
<u>-11</u>	Suite. Apt	o, Apt. #, etc.			Suite, Apl. #, etc.							Additional	1
22					27					5. Certificate of Status Desired		equired	
23	City & State	state			City & State					Election Campaign Financing Trust Fund Contribution		May Be to Fees	
	Zip	Country			Zip Cou					B. This corporation owes or has paid the co			١
24		25 29 30				30				Personal Property Tax due June 30.	Yes [] No	
			and Address of Curr	ent Reg	pistered Agent		81	Name		10. Name and Address of New Registered	Agent		ļ
GRIDI, RAZIEL							•	Name					
4971 NW 54TH STREET COCONUT CREEK FL 33073							82 Street Address (P.O. Box			ss (P.O. Box Number is Not Acceptable)			l
SOCOMO! CILERITE COOLS													1
								City			lar 7in	Code	
							84	City		Fi	85 Zip –	Code	
 Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, office or registered agent, or both, in the State of Forida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid. 							vd b	the corp	corpo oratio	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	of changing i pointment as	ts registered registered	
61	GNATURE	11 1011111101 99	in, and accept the offi	iganona	5 01, 3ection 607.0303, 110	Jilua Siai	ules	,				!	
Signature, typied or printed name of registered agent and life if applicable (NOTE: Re							egistered Agent signature require						6
12 111				ND DIF	RECTORS DELETE		13. 1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change	RS IN 12 Addition	5
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NA!	AME GRIDI, MICHELLE			22		22 NAME						ŀ	
í	STREET ADDRESS 4971 NW 54TH STREET COCONUT CREEK FL 33073			2				2.3 STREET ADDRESS					ļ
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14	, inereny c	eriny mat tr	ie innormation enbblied	with thi	is ining does not quality to	nie exe	mpt	nou state	บเกร	ection 119.07(3)(i), Florida Statutes. I further	sertify that the	intormation	L