5/16/.

## FILED Jun 24, 2002 8:00 am Secretary of State 05-16-2002 90051 046 \*\*\*150.00

## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P94000040010 V  1. Entity Name COOL RUNNINGS CAFE, INC.	
1. Entity Name	
Principal Place of Business Mailing Address 9977 MIRAMAR PARKWAY	
MIRAMAR, FLORIDA	. 36721
2. Principal Place of Business 3. Mailing Address	
Suite, Apt. #, etc. DO N	NOT WRITE IN THIS SPACE
City & State City & State 4. FEI Number 65-0498430	Applied For Not Applicable
Zip Country Zip Country 5. Certificate of Star	atus Desired 58.75 — Additional 5-
6. Name and Address of Outtern Registeries (Special	s of New Registered Agent
BARBARA FOUST; C.P.A.	
3401 N.W. 202ND STREET  MIAMI, FLORIDA 33056  Street Address (P.O. Box Number is N	lot Acceptable)
City	FL Zip Code
B. 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.
3. The above named entity submits this statement for the pyropse of changing its registered office or registered office or registered of the pyropse of changing its registered of the pyropse of the pyrops	
GIGNATURE (NOTE: Registered Agent signature required	d when rainstating) Date
	ampalgn Financing
H. This corporation is eligible to satisfy its little	Contribution. May Be Added to Fees
Make Check Payable to Department of State	
11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS IN 11
Delete TITLE	Change Addition
MAE DAHLIA CHIN	l s
STREET ADDRESS STREET ADDRESS PEMBROKE PINES, FLORIDA 33 <b>6</b> 28 CITY-ST-ZIP	
VICE PRESIDENT	Change Addition
MAAI IDICE CHIN	\`
STREET ADDRESS 16328-N.W. 17TH-STREET	
PEMBROKE PINES, FLORIDA 33\$28 CITY-ST-ZIP	Change Addition
TREASURER Delete TITLE	Change Addition
DUDLEY LEE	
STREET ADDRESS 16328 N.W. 17TH STREET STREET ADDRESS PEMBROKE PINES, FLORIDA 33828 CITY-ST-ZIP	
Dolete ITTE	Change Addition
TITLE DOIGH INC.	
STREET ADDRESS STREET ADDRESS	*
CITY -ST - ZIP CITY - ST - ZIP	
TITLE TO LET TO THE TOTAL OF TH	ChangeAddition
NAME - 100 11	<u> </u>
STREET ADDRESS	
CITY - ST - ZIP  CITY - ST - ZIP  Delete TITLE	Change Addition
THE	
NAME STREET ANNESS	İ
STREET ADDRESS	
CITY - ST - ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(information indicated on this report or supplemental report is true and accurate and that my signature shall have the said am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.	Chapter 607, Florida Statutes; and that my
SIGNATURE ACHIN CKG PRESIDENT	<u>4/30/2002</u> <u>954-431-9331</u>
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #