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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

P94000079397 (3)

CHILL FACTOR, INC.

Principal Place	of Business	Mailing Addre	229	
1855 N.W. 10		1855 N.W.	107TH DRIVE RINGS FL 33071	
				3. Date Inc. 10/2
2. Principal Pla	ice of Business	2a. Mailing Ad	ddress	4. FEI Num
21		26		65
Suite, Apt. #, etc.		Suite, Apt	. #, eţc.	5. Certifica
City & State		Čity & Sta	te	6. Election Trust Fu
Zip	Country	Zip	Country	8. This con
24	25	29	30	Persona
	g. Name and Address of C	urrent Registered Ager		10. Name a
SN	AITH, WILLIAM H	•	81 Nam	e

FILED Jan 16 1998 8:00am Secretary of State

|--|

DO NOT WRITE IN THIS SPACE

orporated or Qualified 7/1994 Applied For 0529473 Not Applicable \$8.75 Additional te of Status Desired \Box Fee Required Campaign Financing \$5.00 May Be Added to Fees nd Contribution poration owes or has paid the current year intangible X Yes □ No Property Tax due June 30. nd Address of New Registered Agent 1855 N.W. 107TH DRIVE Street Address (P.O. Box Number Is Not Acceptable) . / _ . . 5 . 5 4 . == CORAL SPRINGS FL 33071 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Ked name of registered agent and title if applicable ren reinstating) (NÖTE, Registered Agent signature ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE 1.1 TITLE ___ Change Addition SMITH, WILLIAM H NAME 1.2 NAME 1855 N.W. 107TH DRIVE STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33071 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE VTŠ 2.1 TITLE SMITH, CINDY J NAME 2.2 NAME 1855 N.W. 107TH DRIVE STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS FL 33071 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADORESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: