	PLEASE READ	ALL INSTE	RUCTIONS	BEFORE C	OMPLETI	NG THISAR	PRM-VED	B	
	PLICATION FOR STATEMENT	FLORIDA , S		NT OF STATE r <b>tham</b> State			AND	( <b>(</b> )	
DOCUMENT # P95000085686  1. Corporation Name  Cool G, INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business  ADAO BAYBHOLL BIVD  DUNTOIN, FL 34698									
If above addresses are incorrect in any way, line through incorrect information and enter  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If					4. Date Incorpo	orated or Qualified			
Suite, Apt. #, etc. Suite, Apt. #			, elc.		4. Date Incorporated or Qualified To Do Business in Florida				
City & State City & State					59 - 33 49 153 Not Applicable				
Zip	Country	Zip	Count	ry	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Add for a Ce	litional Fee required rtificate of Status	
7. Names a	and Street Addresses of Each Officer and	or Director (Florid							
Title(s)	itle(s) Name of Officers and/or Directors 2		0	reet Address of Each flicer and/or Director lse Post Office Box I	r ""	00002: 4 -10/30	797°°011	70-015 8	
Pies Dork do Snyder			21 Pine	hwst RS	****165.00 ****165.00 Duardin Ft 34498				
Ve	PAUL SNYDGE		21 Pine	churst R	<u>J</u>	Dunelin		Rak	
4								η,	
8. Name and Address of Current Registered Agent Name					1 -	9. Name and Address of New Registered Agent			
Dorpe do Snyder 21 Pineburst Rd Duncoin, pe 34698				Name Dora J. Sny J.  Street Address (P.O. Box Number is Not Acceptable)  2) Pmchurst R 2  Suite, Apt. #, Etc.  City  State   Zip Code   FL 34698					
10. I, being Signature of Registered	Agent	ove named corpora				on 607.0505, F.S.	<i>1</i> .		
11. Do De	es this corporation pay opt. of Revenue under S.	any intang 199.032, F	<del>blo tax to tl</del> Florida Stat	ne utes. Yes	No [	(See	other side for in on intangible ta		
this reins owed by		olution has been e names of individual gnature shall have	liminated, the corp als listed on this for the same legal eff	orate name satisfies m do not qualify for ect as if made under	the requirements an exemption und roath.	of section 607.0401 (	or 617.0401, F.S (i), F.S. The info	S., that all fees ormation indicated	
		INTED NAME OF SIG	ONING OFFICER OR	DIRECTOR		Bate -	Daytimo Pl	none#	

October 24, 1997

Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Enclosed is our application for Corporation Reinstatement. I ask for your attention and consideration in waiving all penalties for late filing. I realize ultimately the burden falls on me to file this return annually, but I never received the original return and never received your reminder, which I was told you normally send out. I know this might seem odd that we never received this notification, since you have our current address, but this is honestly what has happened. The only way I found out about this was I was in the process of transferring a license.

I am enclosing a check for \$ 165.00, in hopes that you can understand my circumstance.

Should our request be denied, please let me know as soon as possible. Thank you in advance for your consideration.

Sincerely yours,

Dora Jo Shyder