2006 FOR PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE: _

Feb 10, 2006 8:00 am Secretary of State ANNUAL REPORT 02-10-2006 90007 004 ***150.00 DOCUMENT # P96000015796 COOLING METHODS, INC. 20006738 Principal Place of Business Mailing Address 17060 NORTHWEST 56TH COURT 17060 NORTHWEST 56TH COURT MIAMI, FL 33055 MIAMI, FL 33055 No Cha-P CR2E034 (11/05) 01182006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0645535 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **GEORGE MORAITIS** DO NOT WRITE 16919 NW 57TH AVE MIAMI, FL 33055 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE ... Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME KONG, WALTER A STREET ADDRESS 17060 NORTHWEST 56TH COURT CITY-ST-ZIP MIAMI, FL 33055 TITLE EDWARDS, MONIQUE NAME STREET ADDRESS 17051 NW 56 CT CITY-ST-ZIP MIAMI, FL 33055 TITLE HYLTON, G NAME STREET ADDRESS 5154 SW 37 ST DO NOT WRITE MIRARMAR, FL 33028 CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED