

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000067849** ✓

1. Corporation Name
KOOL RAG, INC.

Principal Place of Business
**4921 SOUTHFORK DRIVE
LAKELAND FL 33813**

Mailing Address
**4921 SOUTHFORK DRIVE
LAKELAND FL 33813**

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90005 016 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/12/1996

4. FEI Number

59-3466764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

Zip

Country

24

33813-2078

25

29

33813-2078

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MAYER, PETER R
4921 SOUTHFORK DRIVE
LAKELAND FL 33813**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84

Suite 3

City

FL

85 Zip Code

33813-2078

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PSD** ☐ DELETE

NAME **MAYER, PETER R**
STREET ADDRESS **4921 SOUTHFORK DRIVE**
CITY-ST-ZIP **LAKELAND FL 33813**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**4921 SOUTHFORK DRIVE, SUITE 3
33813-2078**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/01/99

Date

941-644-1749

Daytime Phone #

CR2E034 (5/99)

0084946

LAW OFFICES OF
Peter R. Mayer
A PROFESSIONAL ASSOCIATION

S82880-90005-16
P96000067849

SOUTHFORK PROFESSIONAL CENTRE
4921 SOUTHFORK DRIVE, SUITE 2
LAKELAND, FLORIDA 33813

TELEPHONE
(941) 644-1749
(941) 644-2180

TELEFACSIMILE
(941) 644-1749

M E M O

TO: Florida Department of State [Att'n.: Carol]
FROM: Peter R. Mayer, Esq.
DATE: 07/01/99
RE: Peter R. Mayer, P.A. 1999 Profit Corporation Annual Report Packet
Kool Rag, Inc. 1999 Profit Corporation Annual Report Packet

☒ Pursuant to:

☒ telephone conversation of 07/01/99

☐ correspondence

☐ for your reference

Enclosed please find:

- ✓ 1999 Profit Corporation Annual Report for Peter R. Mayer, P.A.
- ✓ check # 4901 in the amount of \$150.00 which represents the Annual Report filing fee
- ✓ 1999 Profit Corporation Annual Report for Kool Rag, Inc.
- ✓ check # 2161 in the amount of \$150.00 which represents the Annual Report filing fee

NOTES:

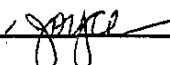
Carol,

We didn't receive the *FIRST NOTICE* with respect to either corporation. The first Notice we received was today indicating it was the *SECOND NOTICE* provided us.

We're advised we have a new address (see enclosed) -- perhaps this is the reason.

Please call if you have questions or require additional information.

Thanks!



/jmp



582880-9005-16
P96000067849

2800 LAKELAND HILLS BLVD
LAKELAND FL 33805-9997

Dear Postal Customer:

The correct and complete address for this location, according to official postal records, appears below. This may be different from or contain more details than the address you are accustomed to using. For example, you may not be using a suite or apartment number, or you may omit a directional like "SE" or a suffix such as ST, AVE, PLACE or the ZIP+4 Code.



POSTAL CUSTOMER
4921 SOUTHFORK DR STE 3
LAKELAND FL 33813-2078

The United States Postal Service handles and delivers 190.9 billion pieces of mail a year over 632 million per day. To provide accurate and timely postal service, high-speed electronic scanning equipment has become a necessity. This makes using your correct and complete address extremely important. Each item provides information. Most importantly, the final four digits of the ZIP+4 Code indicate which block, building or floor you are on.



To ensure accurate and timely delivery, it is very important to make sure all the mail sent to you displays the EXACT address as it appears here. Make sure you are using this address now, so all your mail can reflect your complete address.

Be sure to use the ZIP+4 Code and include all other elements of the above address every time you place your return address on an envelope.

If you have any questions concerning your address as shown above, please contact
UNITED STATES POSTAL SERVICE at (800)275-8777

Thank you for your cooperation.

Your Postmaster

