



FILED
Jan 09, 2007 08:00 AM
Secretary of State

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000016581			
1. Entity Name COLD WATER CORP.			
Principal Place of Business 429 SOUTH BEACH RD. HOBE SOUND, FL 33455	Mailing Address 429 SOUTH BEACH RD. HOBE SOUND, FL 33455		
DO NOT WRITE IN THIS SPACE			
		01052007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0730330	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent DOMENCICH, THOMAS 429 SOUTH BEACH RD. HOBE SOUND, FL 33455		DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000580163 01/10/07-80036-007 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOMENCICH, THOMAS 429 SOUTH BEACH ROAD HOBE SOUND, FL 33455		
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12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: <i>Thomas Domencich</i> THOMAS DOMENCICH 1-5-07 772-545-9571		Date Daytime Phone #	