

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

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthaug Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000070532 (1)
 1. Corporation Name
WAY COOL MANUFACTURING, INC.



Principal Place of Business 3849 HIDDEN ACRES CIRCLE N. FORT MYERS FL 33903	Mailing Address 3849 HIDDEN ACRES CIRCLE N. FORT MYERS FL 33903
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2559 4th St. Suite, Apt. #, etc 22 - City & State 23 Fort Myers, FL Zip 24 33901 Country 25 USA		2a. Mailing Address 26 2559 4th St. Suite, Apt. #, etc. 27 - City & State 28 Fort Myers, FL Zip 29 33901 Country 30 USA		3. Date Incorporated or Qualified 08/14/1997	
4. FEI Number 65-0802517		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent HORTON, W.C. 3849 HIDDEN ACRES CIRCLE N. FORT MYERS FL 33903				10. Name and Address of New Registered Agent 81 Name ROBERT E. JOHNSON 82 Street Address (P.O. Box Number is Not Acceptable) 3849 HIDDEN ACRES CR. 83 - 84 City N. FORT MYERS FL 85 Zip Code 33903			
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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: *Robert E. Johnson* DATE: **6/8/98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	ROBERT E. JOHNSON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	JOHNSON, ROBERT E			1.2 NAME			
STREET ADDRESS	3849 HIDDEN ACRES CIRCLE			1.3 STREET ADDRESS			
CITY-ST-ZIP	N. FORT MYERS FL 33903			1.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				2.2 NAME	TANICE A. JOHNSON		
STREET ADDRESS				2.3 STREET ADDRESS	3849 HIDDEN ACRES CR.		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	N. FORT MYERS, FL. 33903		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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)(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 by an attachment with an address.

SIGNATURE: *Robert E. Johnson* **ROBT E. JOHNSON 4/10/98 941-636-1111**

CR2E034 (10/97)