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

**PROFIT CORPORATION** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS

**FILED** Jul 10 1998 8:00am Secretary of State

KOOL TECHNOLOGY CORPORATION							
Principal Plac	e of Business	Mailing Address					
8586 NW 72nd St. SAME,							
l /					DO NOT WRITE IN THIS SPACE		
MIAMI, FL 33/66					3. Date Incorporated or Qualified		
——————————————————————————————————————	Place of Business	2a. Mailing Address		-	4. FEI Number 65 - 0783966	<del></del>	pplied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					ot Applicable Additional
22	.,	27			5. Certificate of Status Desired	<b>*</b> ·	equired
City & Stat	Ð	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	•	to Fees	
Zip			Country	4	8. This corporation owes or has paid the co	H	_ ·
24	25   29   3   3   3   3   3   3   3   3   3		30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
<del></del>							
actavio Pinto.							
9586 NW 72 nd VY 82 Street Addre					ress (P.O. Box Number is Not Acceptable)		
PS86 NW 72 nd vf Miami, FC 33/66.							
	· · · · · · · · · · · · · · · · · · ·		84	City	Fi	<b>85</b> Zip	Code
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or prested name of registered ages	Land life if applicable (NO	TE. Registered Ag	ent signature requi	red when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOF	R\$ IN 12
TITLE	JD ,	TD □ DELETE 11				Change	☐ Addition
NAME	Renato Lopes 8586 NW 72nd st		12 NAME				
STREET ADDRESS	8586 NW 72 nu 31		1 3 STREET	ADDRESS			
CITY-ST-ZIP	the second secon		1.4 CITY - 5 2 1 TITLE	ST - ZIP		Observe	10000
TITLE NAME		FRENZER DEBIEN 21				L Change	☐ Addition
STREET ADDRESS	8586 NW 72 nd SI	N.C.		ADDRESS			i
CITY-ST-ZIP	MIAMI , FL 33/1		2.4 CITY -	- 1			ł
TITLE	VO (FC )	DELFTE	3.1 TITLE	31-211		Change	Addition
NAME	octavio Pinto		3.2 NAME				ĺ
STREET ADDRESS	2586 NW 72nd St		3.3 STREET	ADDRESS			
CITY - ST - ZIP	8586 NW 72005t miami, F633166		3.4. CITY -	ST-ZIP			
TITLE	√D □ DELETE		4.1 TITLE			Change	☐ Addition
NAME	CRISTINA ROBRIGUE	S	4. 2 NAME	İ			
STREET ADDRESS	8280 NM 15 40 21		4.3 STREET	ADDRESS			
CITY-ST-ZIP	miami, Fr 33/6	6	4.4 CITY - 5	ST - ZIP		F7 81	
TITLE		DELETE	5 1 TITLE			Change	Addition
NAME EXPERT ADDRESS			5.2 NAME	1000000			<i>-</i> ∼>
STREET ADDRESS			5.3 STREET			•	7.10
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 9 6.1 TiffLE	) - ZIF		Change	Addition
NAME			6.2 NAME		0000025866		
STREET ADDRESS			6.3 STREET ADDRESS		-07/13/98010740		
CITY-ST-ZIP			6.4 CITY - 5		***150.00		
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 eath; 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.							