JNIFORM BUSINESS REPORT (UBR) PP08500038099 1. Entity Name Cool Control, Inc 01 AUG -7 PM 3:43 Principal Place of Business Mailing Address W. Oakland Par Bld. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Gerard P. McIntyRE Name Street Address (P.O. Box Number is Not Acceptable) 1650 W. Oakland Park Bld. Fort Lauderdale, FL 33 311 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE ☐ Change ☐ Addition **000004538780**÷--08/16/01--01073--023 GERARD P. McInTYRE NAME 1650 W. Oakland Park Bld STREET ADDRESS STREET ADDRESS CITY-ST-ZIP \*\*\*\*450.00 \*\*\*\*4**50.**00 TITLE-Addition Gerard P. McIntyre 1650 W. Oakland Park Bld. NAME NAME STREET ADDRESS STREET ADDRESS dordule, FL33311 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954) 733-9999

**SIGNATURE** 

CBS FINANCIAL, CPA, PA
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

August 1, 2001

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re:

A Cool Control, Inc.

Form:

1999, 2000, and 2001 Uniform Business Report

Document

P98000038099

Dear Madam/Sir,

We have been retained by the above referenced taxpayer recently as his CPA Firm.

During our initial interview with the taxpayer it was discovered that <u>they never received</u> the Florida's 1999 Uniform Business Report; therefore, they had not filed it. Please note that the taxpayer has moved and has a new mailing address.

Please find enclosed a properly completed 1999 along with the 2000 & 2001 Uniform Business Report and taxpayer's check payable to the Florida Department of State in the amount of \$450.00.

Please abate any late filing fees or other penalties. A Cool Control, Inc. did not intended to file late.

Please do not hesitate to contact our offices if you have any questions.

Sincerely

CBS FINANCIAL, CPA, PA

Hais A/Escobar, Jr., CPA Encl.: 1999, 2000 & 2001 Uniform Business Report

Cc.: A Cool Control, Inc.

6209 W COMMERCIAL BLVD. SUITE # 7 FT. LAUDERDALE FLORIDA 33319

TEL: (954) 724-4141 FAX: (954) 724-4171 U.S.: (877) 227-9797