## **2003 FOR PROFIT CORPORATION**

## May 09, 2003 8:00 am § Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P9900001310 DOCUMENT # 05-09-2003 90144 019 \*\*\*150.00 1. Entity Name COOL WAYS PROMOTIONAL PRODUCTS, INC. Principal Place of Business Mailing Address 2849 WAYMEYER DRIVE 2849 WAYMEYER DRIVE ORLANDO FL 32812 ORLANDO FL 32812 2. Principal Place of Business 3. Mailing Address 4301 Farrell Ln. 4301 Farrell LA. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For 59-3548306 rkndo Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRIGGS, MICHAEL T -Street Address (P.O. Box Number is Not Acceptable) 4301 FAVVEII LA 2849 WAYMEYER DRIVE ORLANDO FL 32812 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 gent. or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE" Addition Detete TITLE NAME BRIGGS, MICHAEL T NAME 2849 WAYMEYER DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32812 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition Delete \_ NĂME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition ŀ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME

12. 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 10 or Block 11 if changed, or on an attachment with an address

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

attacherent

P99000001310

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5/01/03

Division of Corporations Uniform Business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

I am writing this letter to seek your forgiveness on our delinquent filing. I honestly had the due date written down as 5/15 in my planner, and was actually planning on getting this done before the due date. Your notice states that a fee of \$550.00 is due with a late report. I am respectfully requesting you to forgive that late fee, as this was not an intentional matter, and to be quite honest, that fee would be a financial hardship for our company at this point as we are still trying to recover from Post 9-11 downturn.

Thank you for your understanding.

Best Regards,

Michael Briggs President

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