FILED

Daytime Phone #

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Sep 06, 2001 8:00 am Secretary of State P99000026380 DOCUMENT # 1. Entity Name 09-06-2001 90269 033 \*\*\*150.00 COOL PLACES, INC. Principal Place of Business Mailing Address 671 SISKIQOU-BLVD. 1881 WASHINGTON AVENUE-PH ASHLAND OR 97520 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address ZETWAShinc Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 58-2310414 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required. 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GREEMAN, GREGORY Street Address (P.O. Box Number is Not Acceptable) 1881 WASHINGTON AVENUE, PH MIAMI BEACH FL 33139 Zip Code City FI 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 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 September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Channe ☐ Delete TITLE TITLE FREEMAN, GREGORY NAME NAME STREET ADDRESS STREET ADDRESS 1881 WASHINGTON AVENUE-PH CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 Delete TITLE Change Addition TITLE STD NAME NAME MOYA, ADRIANA STREET ADDRESS STREET ADDRESS 1881 WASHINGTON AVENUE-PH CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 Change - Addition-☐.Delete JITLE TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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.

Attachment AF P99 000026380 A0083868

## Cool Places, Inc.

August 15<sup>th</sup>, 2001

To: Florida Department of State, Division of Corporations

From: Cool Places, Inc

Re: Document Requesting Payment - Lost

## Dear Sir or Madam:

It is with great regret that I received your notice of our Corporation being late for payment on the Corporation Fee. It was not until the week of August 15<sup>th</sup>, that we received this form forwarded to our 1881 Washington address in Miami Beach.

I have enclosed a change to the mailing address hoping that next year this form/bill will come directly to us, and I am asking for your assistance in allowing us to pay the regular charge of \$150 for the year 2001. We were not aware of this amount owing or of a due date for earlier part of 2001. Our accountant normally handled these matters. Unfortunately, as I see this late notice come in I see that some things were not processed on time.

We are very grateful in any help you can give us on this matter.

Gratefully,

Cool Places, Inc.