2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029005

Entity Name: MIDPOINT COOLING, INC.

FILED Apr 19, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

13880 TREELINE AVE #6 13880 TREELINE AVE #6

SOUTH FT. MYERS, FL 33913 SOUTH FT. MYERS, FL 33913 US

Current Mailing Address: New Mailing Address:

13880 TREELINE AVE #6 13880 TREELINE AVE #6

SOUTH FT. MYERS, FL 33913 SOUTH FT. MYERS, FL 33913 US

FEI Number: 65-0916580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOWERS, ROBERT L DZILINSKI, EUGENE 205 E JOEL BLVD DZILINSKI, EUGENE 13880 TREELINE AVE

SUITE 110 #6
LEHIGH ACRES, FL 33972 US SOUTH FORT MYERS, FL 33913 US

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: EUGENE DZILINSKI 04/19/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 DZILINSKI, EUGENE
 Name:
 DZILINSKI, EUGENE

 Address:
 P.O. BOX 50967
 Address:
 P.O. BOX 50967

 City-St-Zip:
 FT. MYERS, FL 339940967
 City-St-Zip:
 FT. MYERS, FL 33994 US

Title: VSD () Delete Title: VSD (X) Change () Addition

 Name:
 DZILINSKI, JO-ANN
 Name:
 DZILINSKI, JO-ANN

 Address:
 P.O. BOX 50967
 Address:
 P.O. BOX 50967

City-St-Zip: FT. MYERS, FL 339940967 City-St-Zip: FT. MYERS, FL 33994 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE DZILINSKI PTD 04/19/2004