

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)** Year

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90190 018 ***150.00

DOCUMENT #

1. Entity Name

Doctor Cool Air Inc. P99 0006 67747 ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

924 EL Dorado Pkwy West

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Cape Coral FL

Zip

Country

Zip

Country

4. FEI Number

65-0935468

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

90138433

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

BRIAN Kelly

Street Address (P.O. Box Number is Not Acceptable)

924 EL Dorado Pkwy West

City

Cape Coral

FL

Zip Code

33914

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

Brian J. Kelly Brian J. Kelly President

5-27-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D Kelly, Brian
924 EL Dorado Pkwy W
Cape Coral, FL 33914

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D Kelly, Nadine
924 EL Dorado Pkwy W
Cape Coral, FL 33914

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Brian J. Kelly

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-27-03 239 540-8833

CR2E034B (12/01)

Attachment
90138433

Diane Simpson CPA, P.A.

8644 Northwest 29th Drive, Coral Springs, Fl. 33065 (954) 796-0564, fax 954 753-1298

May 27, 2003

Division of Corporations
~~Uniform Business Report Filings~~
PO Box 1500
Tallahassee, Fl. 32302-1500

Re: Doctor Cool Air Inc.
Ein: 65-0935468
Doc # P99000067747

Dear Sir or Madam,

The above referenced client moved this year from Oakland Park to Cape Coral, Florida.
Please update your record to reflect their correct address of:

924 El Dorado Parkway W
Cape Coral, Fl. 33914

We are enclosing a check for \$150 with a completed Uniform Business Report since they never received one.

Sincerely,

Diane Simpson CPA