## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 01, 2002 8:00 am Secretary of State DOCUMENT # F97000006729 1. Entity Name 05-01-2002 91490 030 \*\*\*150.00 INTERNATIONAL DAIRY QUEEN, INC. Principal Place of Business Mailing Address 7505 METRO BLVD. 7505 METRO BLVD. MINNEAPOLIS MN 55439 PO BOX 39286 MINNEAPOLIS MN 55439 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 52-2066843 Not Applicable Zip Country Zip 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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 Ę, SIGNATURE 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PCEO** ☐ Delete TITLE CR2E034 (9/01) ☐ Change ☐ Addition NAME MOOTY, CHARLES NAME STREET ADDRESS 7505 METRO BLVD. STREET ADDRESS CITY-ST-ZIP MINNEAPOLIS MN 55439 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MOOTY, JOHN W NAME STREET ADDRESS 7505 METRO BLVD. STREET ADDRESS CITY-ST-ZIP MINNEAPOLIS MN 55439 CITY-ST-ZIP SATC ☐ Delete TITLE ☐ Change ☐ Addition NAME SIMPSON, JAMES NAME STREET ADDRESS 7505 METRO BLVD. STREET ADDRESS CITY-ST-7IP MINNEAPOLIS MN 55439 CITY-ST-ZIP TITLE **VP** Delete TITLE ☐ Change ☐ Addition NAME BROIN, MARK S Watson, Edward A. STREET ADDRESS 7505 METRO BLVD. STREET ADDRESS 7505 METOBING. CITY-ST-ZIP MINNEAPOLIS MN 55439 CITY-ST-ZIP minulabolis imn SSU39 TITLE ☐ Delete TITLE ☐ Change Addition ZUCCO, WILLIAM NAME STREET ADDRESS 7505 METRO BLVD. STREET ADDRESS CITY-ST-ZIP MINNEAPOLIS MN 55439 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME 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. SIGNATURE:

SEQUIREDames S. Simpson 01118102 ND TYPED OR PRINTED NAME OF SIGNING OFFICE

**FILED**