

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 23 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10162007 REIN-P CR2E098 (1/07)

DOCUMENT # P06000120720

1. Entity Name
PHILLY'S FAMOUS WATER ICE, INC.



Principal Place of Business
**2333 SAN RAMON VALLEY BLVD., SUITE 160
SAN RAMON, CA 94583**

Mailing Address
**2333 SAN RAMON VALLEY BLVD., SUITE 160
SAN RAMON, CA 94583**

2. Principal Place of Business - No P.O. Box #
1102 N. 28th Street

3. Mailing Address
1102 N. 28th Street

Suite, Apt. #, etc.

City & State
Tampa, FL

City & State
Tampa, FL

Zip
33605

Country
U.S.A

Zip
33605

Country
U.S.A

4. FEI Number
20-5578795

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name

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

City

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 agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2008, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, with all other like empowered.

SIGNATURE: *[Signature]* **10/16/07** **815-353-8645**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

112

10/24

2052

Title	Vice President	Addition
Name	Megan Phirsch	
Street Address	2333 San Ramon Valley Blvd, Suite 160	
City-ST-Zip	San Ramon, CA 94583	

Title	Vice President	
Name	Ryan Culbeck	
Street Address	2333 San Ramon Valley Blvd, Suite 160	Addition
City-ST-Zip	San Ramon, CA 94583	