

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000038185 (1)

1. Corporation Name

FAMILY YOGURT & ICE CREAM, INC.



Principal Place of Business: 9479A BOCA GARDENS PKWY. BOCA RATON FL 33496  
Mailing Address: 9479A BOCA GARDENS PKWY. BOCA RATON FL 33496

3. Date Incorporated or Qualified: 05/12/1995  
3a. Date of Last Report: [Blank]  
4. FET Number: 38-3195663  
Applied For: [Blank]  
Not Applicable: [Blank]  
5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [ ] Yes [x] No

2. Principal Place of Business: 5283 W Atlantic  
21. Suite, Apt. #, etc.: Booth 156  
22. City & State: DELRAY BEACH FL  
23. Zip: 33484  
24. Country: Palm Beach  
25. 26. 27. 28. 29. 30.

9. Name and Address of Current Registered Agent  
D'ONOFRIO, JOSEPH  
9479A BOCA GARDENS PKWY.  
BOCA RATON FL 33496

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City: FL  
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	[ ] Change [ ] Addition
NAME	D'ONOFRIO, JOSEPH	1.2 NAME	
STREET ADDRESS	9479A BOCA GARDENS PKWY.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	[ ] Change [ ] Addition
NAME	BREY, JOSEPH	2.2 NAME	
STREET ADDRESS	9479A BOCA GARDENS PKWY.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	[ ] Change [ ] Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	[ ] Change [ ] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, changed or not attached with an address.

SIGNATURE: [Signature] DATE: 4/29/96  
407631-3040

CR2E034 (12/95)