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

PROFIT CORPORATION ANNUAL REPORT



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

1996 521488 DOCUMENT # 1. Corporation Name

(7)

JACK FROST LABORATORIES, INC.

							DI OIDH BIDH DIDH IDDI
Principal Place	of Business	Maling Address					
3414 INDUSTRIAL 33RD ST 3414 INDUSTRIAL FT. PIERCE FL 34946 FT. PIERCE FL 34							
					3. Date Incorporated or Qualified 12/30/1976	3a. Date of 06/1	Last Report 6/1995
2. Principal Pla	ice of Business	2a. Mailing Address	Mailing Address		4. FEI Number	L	Applied For
2		26	26				Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
2		27			6 Flatia Consider Engaging		
City & State		28	Oity & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation has liability for i	ntangible tax u	
4	25	29	30	•	Florida Statutes		
<u> </u>	g. Name and Address of Current			.,	10. Name and Address of New R	egistered Ag	ent
				31 Name			
FRANCI	S, SAM E. JR.			32 Street Addr	ress (P.O. Box Number is Not Acceptab	ile)	
	DUSTRIAL 33RD STREET			Street Addi		·	
FT. PIERCE FL 34946-5641				33			
			-	34 City			85 Zip Code
					ration submits this statement for the pur	┡┖╵	
12.	Signature, typed or printed many of registered agent a OFFICERS AND	DIRECTORS	13.	Specialist terpus	ADDITIONS/CHANGES TO OFF		
TITLE	PTD	[] DELETE	1-170	LE			Change 🔲 Addition
NAME	FRANCIS, SAM E., JR.		1.2 NA	de			
STREET ADDRESS	3414 INDUSTRIAL 33RD ST			REET ADDRESS			
CITY - ST - ZIP	FT. PIERCE FL VSD	DELETE	1.4 Ci! 2.1 Ti	Y - S1 - Z ₁ P		———	Change
TITLE	FRANCIS, CYNTHIA L.	[] вине	2 2 NA				- · · · · ·
NAME STREET ADDRESS	3414 INDUSTRAIL 33RD ST			KEET ADDRESS			
DINKEL MUDDESS	FT. PIERCE FL			Y-SI-20			
TITLE		DELETE	3 1 TI				Change 🔲 Addition
NAME			3 2 NA	ME			
STREET ADDRESS			3.3 \$1	REET ADORESS			
CITY - ST - ZIP				r · S² · ZiP			Ohana (T) Addition
TITLE		□ DELETE	4 1 TH				Change
NAME			4 2 NA				
STREET ADDRESS			4	REET ADDRESS			
CITY - ST - Z-P		DELETE	5 1 T	Y - S1 - 7(F		П	Change
THLE		Doctor	5 2 NA	ı			- -
NAME STREET ADDRESS				REFT ADDRESS			
CITY - ST - ZIP				(V - ST - 71P			
TITLE		DELETE	6 1 1				Change Addition
NAME			6 2 N	ME			
STREET ADDRESS			6 3 ST	REET ADDRESS			
CITY - ST - ZiP			6.4 ()	TY - ST - 21F	for the exemption stated in Section 119	07:0.11 5	de Chabadaa 1 fadaa

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 Brook 13 if changed, or on an attachment with an address.

SIGNATURE:

4-23-94 407-465-7171