

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 820415 (8)
1. Corporation Name
BASKIN-ROBBINS USA, CO.



Principal Place of Business Mailing Address
31 BASKIN-ROBBINS PLACE 31 BASKIN-ROBBINS PLACE
GLENDALE CA 91201 GLENDALE CA 91201-2738

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/05/1967		04/01/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		95-2273966		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
				6. Election Campaign Financing		5.00 May Be Added to Fees	
				Trust Fund Contribution			
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	GIOIA, ANTHONY	1.2 NAME	
STREET ADDRESS	31 BASKIN ROBBIN PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	1.4 CITY-ST-ZIP	
TITLE	SRVP	2.1 TITLE	
NAME	GIOIA, ANTHONY	2.2 NAME	
STREET ADDRESS	31 BASKIN ROBBIN PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	
NAME	WOODS, KENTON	3.2 NAME	
STREET ADDRESS	31 BASKIN ROBINS PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	KELLER, MICHAEL	4.2 NAME	
STREET ADDRESS	31 BASKIN-ROBBINS PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA 91201	4.4 CITY-ST-ZIP	
TITLE	VS	5.1 TITLE	
NAME	LOVEJOY, JERRY L	5.2 NAME	
STREET ADDRESS	31 BASKIN-ROBBINS PLACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA 91201	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address.

SIGNATURE

4-8-97 (818) 549-8219

CR2E034 (9/96)