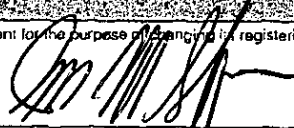
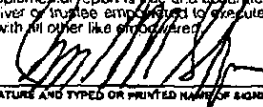


**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

5/6/2004-9

FILED
Jun 18, 2004 8:00 am
Secretary of State

05-06-2004 90166 027 ***150.00

DOCUMENT # F 67867			
1. Entity Name JACK FROST, INC.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business MIAMI, FL.		3. Mailing Address 799 NE 72 ST	
Suite, Apt. #, etc. SAME		Suite, Apt. #, etc.	
City & State MIAMI, FL.		City & State MIAMI, FL.	
Zip 33138	Country USA	4. FEI Number 39-2105150	Applied For ☐ No: Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name IRWIN M. SHAPIRO			
Street Address (P.O. Box Number is Not Acceptable) 799 NE 72 ST			
City MIAMI State FL Zip Code 33138			
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 		DATE 6/11/04	
FEE IS \$61.25 Initial or Amended UBR		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P IRWIN M. SHAPIRO 799 NE 72 ST MIAMI, FL. 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T FERNE N. SHAPIRO 799 NE 72 ST MIAMI FL. 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like information.			
SIGNATURE: 		DATE 5/2/04 305.772-5750	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

66428485

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

Name **IRWIN M. SHAPIRO**

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

799 NE 72 ST

City **MIAMI**

State **FL**

Zip Code **33138**

**DO NOT WRITE
IN THIS SPACE**

CR2E037B (1/2002)

Attachment

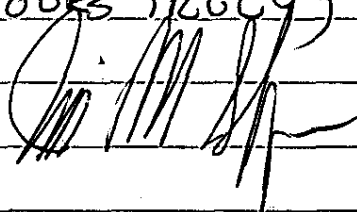
JUNE 14 2004

06428485
#F67867

TO WHOM IT MAY CONCERN,

THE "UBR" WAS FILED WITH ANOTHER "UBR" WHERE THE
REGIST. AGENT IS HARRY TEMPKINS, BY MISTAKE I
PUT HIS NAME ON THE "UBR FOR JACK FROST, INC."
I WHITED OUT THE MISTAKE AND PLACE MY NAME
& ADDRESS. - I WILL SIGN FOR VERIFICATION.

YOURS TRULY,

A handwritten signature in dark ink, appearing to be "J. M. K." with a stylized flourish at the end.