2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004296

City-St-Zip:

Entity Name: FROZEN CUSTARD OF SOUTH FLORIDA, INC.

FILED Aug 24, 2005 Secretary of State

| Current P | rincipal Place | of Business: | New Prince | New Principal Place of Business: | | |
|---|--|--|---|--|--|--|
| 12801 W S SUNRISE, | SUNRISE BKLV FL 33323 L | D SPACE 735 JS | | | | |
| Current M | ailing Addres: | s: | New Maili | New Mailing Address: | | |
| 12801 W SUNRISE BKLVD SPACE 735 SUNRISE, FL 33323 US | | | | 26698 SAINT MICHAELS ROAD EASTON, MD 21601 US | | |
| FEI Number: | 52-1918372 | FEI Number Applied For() | FEI Number Not App | licable () | Certificate of Status Desired () | |
| Name and | Address of C | urrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| 860 NW 86 PLANTATI The above | ON, FL 33324 named entity s | US | ourpose of changing i | ts registered | l office or registered agent, or both, | |
| in the State | of Florida. | | | | | |
| SIGNATUR | | | | | | |
| | Electroni | c Signature of Registered Age | ent | | Date | |
| | | (2)(b), F.S., the corporation did no Trust Fund Contribution (). | ot receive the prior notic | e. | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | CPT () RIECK, HARRY 924 S.E. 5TH CT FT. LAUDERDAL | . . | Title: Name: Address: City-St-Zip: | | | |
| Title: Name: Address: City-St-Zip: | V () RIECK, SHARON 924 S.E. 5TH CT FT. LAUDERDAL | | Title: Name: Address: City-St-Zip: | RIECK, HAR | MICHAELS ROAD | |
| Title: Name: Address: City-St-Zip: | () | Delete | Title: Name: Address: City-St-Zip: | RIECK, SHAF | MICHAELS ROAD | |
| Title: Name: | () | Delete | Title: Name: | S DESANTIS, A | | |

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

PLANTATION, FL 33323

SIGNATURE: SHARON RIECK T 08/24/2005