## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # G92166 (9) GELATO DI ROMA, INC. Principal Place of Business Mailing Address 92550 OVERSEAS HIGHWAY 92550 OVERSEAS HIGHWAY SUITE 208 SUITE 208 DO NOT WRITE IN THIS SPACE TAVERNIER FL 33070 TAVERNIER FL 33070 3. Date Incorporated or Qualified 03/20/1984 2. Principal Place of Business 11 186 BAYShore Mailing Address Applied For 186 BAYSHORE DRIVE Suite, Apt. #. etc. Not Applicable 59-2398959 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State. City & State \$5.00 May Be 6, Election Campaign Financing Destin DESTIN Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 OKA LODS A OKALDOS Yes Yes 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent Name ASHLEY, RONALD F. 340 SUNSET DRIVE #1808 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33301 83 84 City Zip Code 85 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 Statu 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 (NOTE: Registered Agent signature required when reinstating) 12. 13. TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change Addition ASHLEY, VIVIAN M. NAME 1.2 NAME STREET ADDRESS 340 SUNSET DR. UNIT 1808 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELFTE TITLE **CST** 2.1 MILE Change Addition NAME ASHLEY, RONALD F. 2.2 NAME STREET ADDRESS 340 SUNSET DR. UNIT 1808 2.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE 4.1 THILE Change ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 513016 NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY - ST - ZIP TITLE □ DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 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 annual report or suppliemental 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.

Tousla

CITY-ST-ZIP

5-01-98 (850)650-0053