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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K87657

(8)

CARBERRY'S HOMEMADE ICE CREAM, INC.

FILED
Mar 31 1997 8:00am
Secretary of State

3/4/97 407-452-2900

Principal Place of Bashess Maring Address							
42 ROSE STRE MERRITT ISLAN US	T	42 ROSE STREET MERRITT ISLAND FL 32953-4730 US					
				3. Date Incorporated or Qualified 05/12/1989	3a. Date of Last Report 05/01/1996		
	ace of Business	2a. Mailing Address			4. FEI Number Applied For 59-2947611 Not Applied		pplied For lot Applicable
Suite: Apt. 	# esti:	Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75	Additional Required
City & State		City & State			6. Election Campaign Financing) May Be
23	roomer again	28	T Country		Trust Fund Contribution		to Fees
Ζψ· 24]	Country 25.	29 Country		8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes See No			
. 	9. Name and Address of Currer				10. Name and Address of New Re	gistered Agent	
	Berry, Stephen R.		81	Name			
	PATRICK AVE.		62	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
MEH	RITT ISLAND FL 32953		83		ALL MARKET LINE CONTROL OF THE CONTR		
			84	City		85 Zig	Code
				_	poration submits this statement for the p	FL T	
SIGNATURI	September 1 to 1 t	on a ct i sur applicante (NC			tion's board of directors. I hereby acception and the directors of the directors. I hereby acceptance of the directors of the	197.	
12. 	OFFICERS AN	ID DIFF CTORS	1.1 Till.E		ADDITIONS/OFFIANCES TO OFFIC	Change	
NAM	CARBERRY, STEPHEN R.		1.2 NAME				
SUSSELLATEDIOLS	265 PATRICK AVE.		1.3 STREET ADDRESS				
CHY ST 741	MERRITT ISLAND FL	DELETE	1.4 CHY-SI-ZIP 2.1 TILE			Change	Addition
1 ILS NGM!	VD Carberry, Stephen R.	("1 barene	2.1 NILE 2.2 NAME			Onang.	L Noonia
\$186 F 2008F05	265 PATRICK AVE.		23 STREET	ADDRESS			
CPM 51 77	MERRITT ISLAND FL		2 4 CITY-	S1 - ZIP			
)-1 f		L DELETE	3.1 TITLE 3.2 NAME			Change	Addit on
NAMI Stea Datosens			3.2 NAME	ADDRESS			
ODY 51.7 -			3.4. CITY -	S1 - Z(P			
lii.t		DELETE	4 1 TIFLE		•	☐ Change	Add:tion
NAME			4 2 NAME	r Address			
S REEL ADEM 5 - CHY SL Z#:			44 CiTY - S				
101.F		DELETE				☐ Change	Addition
N-W	 		5.2 NAME				
STREET ADDRESS:				ADDRESS			
Offy S1 707		· · · · · · · · · · · · · · · · · · ·		ST - ZIP		Спапда	Addition
PVA			6 1 TITLE.				. =
\$18H1 ADI = 175			6.3 STREE	T ADDRESS			
[[] [] [] [] [] [] [] [] [] [] [] [] []			6.4 CITY- 3		d in Cooling 110 07/0/03 Florida Contra	a I further earlift the	ot the
ir termina Larmani e	an acceptance of the control of the experience.	supplemental annual report is in the receiver or trustee empo	strue and acc swered to exec	urate and the	od in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S	il effect as it made i	inder oath, that