## 2000 UNIFORM BUSINESS REPORT (UBR)

STF FL32519F.1

DOCUMENT # 4 95 000000 \$89 .  1. Entity Name				FILED		
BOCA RATON ICE CREAM EXTRAVAGANZA, L.C.				Apr 24 2000 8:00 am Secretary of State		
Principal Pla	ace of Business	Mailing Address	<del></del> -	<del>- </del>		
	AZA REAL	C/O BARRY HAN	MERITING			
BOCA RATON, FL 33432		12 CATHEDRAL COURT				
1 2001	11011, 12 33432	CLIFTON PARK,				
	÷	CLIFTON PARK,	, N1 12003	1		
2. Principal I	Place of Business	3. Mailing Address		-		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE,		
City & State		City & State		4. FEI Number   Applied For		
Shy d State		City & State			pplied For ot Applicable	
Zip Country		Zip	Country			
	<u> </u>			5. Certificate of Status Desired 55.00 Add Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
			Name	Name		
CORPORATION INFORMATION SERVICES, INC.			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
5	AYES STREET		Street Address	Silvert Madricss (M.S. Box Number is Not Acceptable)		
TALLAH	ASSEE, FL 32301					
					-	
			City	FL Zip Coo	je	
9 The shows	nomed ontity submits this statement	-4 f the ways of the wall		· - 1		
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.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
··-						
	. •	FILE NOW	FEE IS \$50.00		l	
		Make Check Payal	ole to Department of	State		
9.	MANUA CINIC MENADO	OCAMANA OF DO				
TITLE	MANAGING MEMBE	:RS/MANAGERS  Delete	10.	ADDITIONS/CHANGES	<del></del>	
NAME	Tiora :		TITLE NAME	Change	Addition 2	
STREET ADDRESS	ROBERT J. HAMERLING		STREET ADDRESS		9	
CITY - ST - ZIP	12/5 CRYSTAL WAY, APT I		CITY - ST - ZIP			
TITLE	DELRAY BEACH, FL	33444 Delete	TITLE	Change	CR 2E 083 (11/99	
NAME	MGRM		NAME			
STREET ADDRESS	KAREN HAMERLING		STREET ADDRESS	30000324709: -05/10/0001014		
CITY - ST - ZIP	12 CATHEDRAL COU		CITY - ST - ZIP		##66 UW   000	
TITLE	CLIFTON PARK, NY	12065 Delete	TITLE	Change	Addition	
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CITY - ST - ZIP			CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that i am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						
,				2//		
SIGNATI	URF: X			x 7/37/00		
SIGNATURE AND TYPED OF BUILTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #						