

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2002 8:00 am
Secretary of State

08-15-2002 90045 042 ***158.75

DOCUMENT # P00000012084

1. Entity Name
BROADWAY N.Y. ITALIAN ICES, INC.

Principal Place of Business
**7932 VINEYARD LAKE ROAD NORTH
 JACKSONVILLE FL 32256**

Mailing Address
**7932 VINEYARD LAKE ROAD NORTH
 JACKSONVILLE FL 32256**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2450-1 State Rd 16
 Suite, Apt. #, etc.

3. Mailing Address
2450-1 State Rd 16
 Suite, Apt. #, etc.

City & State
ST. Augustine, FL

City & State
ST. Augustine, FL

4. FEI Number **59-3635552**

Applied For
 Not Applicable

Zip
32090

Country
USA

Zip
32092

Country
USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JETER, WILLIAM H JR
 10110 SAN JOSE BLVD.
 JACKSONVILLE FL 32257**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **KOENIGSBERG, ERIK J**
 STREET ADDRESS **7932 VINEYARD LAKE ROAD NORTH**
 CITY-ST-ZIP **JACKSONVILLE FL 32256**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **KOENIGSBERG, HELENE M**
 STREET ADDRESS **9123 TIMBERLIN LAKE ROAD**
 CITY-ST-ZIP **JACKSONVILLE FL 32256**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Erik J. Koenigsberg** **ERIK J. KOENIGSBERG** 8/12/02 (904) 825-4128

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment 974359
P00000012084

BROADWAY NY ITALIAN ICES INC.

2450-1 State Road 16
St. Augustine, Fl. 32092
(904) 825-4128

August 12, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Re: Broadway NY Italian Ices Inc.
FEI #59-3635552

Gentlemen:

Please be advised that we did not receive the prior notice of the 2002 Uniform Business Report.

Enclosed herewith please find our check in the amount of \$158.75 to cover the original \$150.0 filing plus the \$8.75 fee for certificate of status.

Very truly yours,



Erik J. Koenigsberg
President