## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000122286

Entity Name: FROZEN EXPLOSION, INC.

FILED Apr 29, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

340 VININGS WAY BLVD., #12-105 202 EAST HIGHWAY 98 DESTIN, FL 32541 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

340 VININGS WAY BLVD., #12-105 1231 QUAIL LAKE BOULEVARD

DESTIN, FL 32541 DESTIN, FL 32541

FEI Number: 30-0017305 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PULLEN, MONTGOMERY
340 VININGS WAY BLVD., #12-105

DESTINATION OF STIME FOR A 23544

DESTIN, FL 32541 DESTIN, FL 32541

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: MONTGOMERY PULLEN 04/29/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: PULLEN, MONTGOMERY Name: PULLEN, MONTGOMERY Address: 340 VININGS WAY BLVD., #12-105 Address: 1231 QUAIL LAKE BOULEVARD

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: VSTD ( ) Delete Title: VSTD (X) Change ( ) Addition

Name: PULLEN, BROOKE Name: PULLEN, BROOKE

Address: 340 VININGS WAY BLVD., #12-105 Address: 1231 QUAIL LAKE BOULEVARD

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

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.

SIGNATURE: MONTGOMERY PULLEN PD 04/29/2003