

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90011 023 ***150.00

DOCUMENT # P02000103252

1. Entity Name

HAWAIIAN SHAVE ICE, INC.



Principal Place of Business

5120 S.W. 195TH TERRACE
SOUTHWEST RANCHES FL 33332

Mailing Address

5120 S.W. 195TH TERRACE
SOUTHWEST RANCHES FL 33332

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

52-2382294

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BREITKREUZ, STEVEN J
5120 S.W. 195TH TERRACE
SOUTHWEST RANCHES FL 33332

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE SD ☐ Delete
NAME JOSEPH, GEORGE P III
STREET ADDRESS 19101 S.W. 61ST MANOR
CITY-ST-ZIP SOUTHWEST RANCHES FL 33332

TITLE PTD ☐ Delete
NAME BREITKREUZ, STEVEN J
STREET ADDRESS 5120 S.W. 195TH TERRACE
CITY-ST-ZIP SOUTHWEST RANCHES FL 33332

TITLE EVD ☐ Delete
NAME WHALEN, JEFFREY
STREET ADDRESS 14321 MUSTANG TRAIL
CITY-ST-ZIP SOUTHWEST RANCHES FL 33330

TITLE D ☐ Delete
NAME WHALEN, KAREN
STREET ADDRESS 14321 MUSTANG TRAIL
CITY-ST-ZIP SOUTHWEST RANCHES FL 33330

TITLE D ☐ Delete
NAME JOSEPH, CYNTHIA H
STREET ADDRESS 19101 S.W. 61ST MANOR
CITY-ST-ZIP SOUTHWEST RANCHES FL 33330

TITLE D ☐ Delete
NAME BREITKREUZ, H. DENISE
STREET ADDRESS 5120 S.W. 195TH TERRACE
CITY-ST-ZIP SOUTHWEST RANCHES FL 33332

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Steven J Breitkreuz 2/7/04

954-296

6018