2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047051

Address:

City-St-Zip:

1384 HYDE PARK DR

PORT ORANGE, FL 32128

Entity Name: BROOKLYN ICE CAFFE, INC

FILED Apr 05, 2008 Secretary of State

y	mer brook	2114 10 E 07 11 1 E, 11 40.			
Current P	rincipal Plac	e of Business:	New Principal P	New Principal Place of Business:	
	DE MORRIS E	BLVD			
#601 PORT OR.	ANGE, FL 32	2129			
	lailing Addre		New Mailing Ad	dress.	
	_		new maning Au	410331	
4649 CLYI #601	DE MORRIS E	BLVD			
	ANGE, FL 32	2129			
FEI Number:	: 35-2210306	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
FALRUGGIO, PHILIP P 2053 OAK MEADOW CIRCLE S DAYTONA, FL 32119 US			2053 OAK MÉAD	FARRUGGIO, PHILIP P 2053 OAK MEADOW CIRCLE S DAYTONA, FL 32119 US	
	named entity e of Florida.	submits this statement for the	e purpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: PHILIP P FARRUGGIO				04/05/2008	
	Electro	onic Signature of Registered A	gent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ENGLER, KEÏ 460 GRANADA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FARRUGGIO,	WOOD TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	FARRUGGIO, 2053 OAK ME) Delete PHILIP P ADOW CIRCLE ACH, FL 32119	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (INFANTOLINC) Delete), THOMAS W	Title: VP Name: MOHL	(X) Change()Addition , VICTOR G	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: PHILIP P FARRUGGIO S 04/05/2008

4348 CANDLEWOOD LANE

PONCE INLET, FL 32127