

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067956

Entity Name: CLUB PURPLE ICE, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

733 NW 78 ST
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1445
MIAMI, FL 33147

New Mailing Address:

FEI Number: 20-2730246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, KEITH
828 NW 79 ST
MIAMI, FL 33150 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: WILSON, KEITH
Address: 828 NW 79 ST
City-St-Zip: MIAMI, FL 33150

Title: V () Delete
Name: LINEN, ROMEO
Address: P.O. BOX 1445
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: KEITH, KEITH
Address: P.O. BOX 1445
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KEITH WILSON

PST

04/27/2005

Electronic Signature of Signing Officer or Director

Date