

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P93000087533**

1. Corporation Name

**O. AND B. INVESTMENT COMPANY, INC.**  
**DBA- ARCTICA ICE CREAM**

Principal Place of Business

~~5984 N.W. 55 LANE~~  
~~TAMARAC FL 33019~~  
~~US~~

Mailing Address

~~6801 SW 26TH CT~~  
~~MIRAMAR FL 33023~~  
~~US~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.  
**3901 NORTH 50 TH AVE**  
City & State  
**HOLLYWOOD FLORIDA**  
Zip  
**33021**  
Country  
**USA**

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.  
**3901 NORTH 50 AVE**  
City & State  
**HOLLYWOOD, FLORIDA**  
Zip  
**33021**  
Country  
**USA**

4. Date Incorporated or Qualified To Do Business in Florida

**12/20/1993**

5. FEI Number

**65-0479508**

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
<del>V.P.</del>	<del>BLANCO, JEANNETTE</del>	<del>6730 SOUTHWEST 26 COURT</del>	<del>MIRAMAR FL</del>
<del>ST</del>	<del>CABALLERO, HUGO</del>	<del>6730 SOUTHWEST 26 COURT</del>	<del>MIRAMAR FL</del>
<b>P</b>	<b>OLSTEIN, HARRY</b>	<b>3901 N. 50 AVE</b>	<b>HOLLYWOOD FL. 33021</b>
<b>V.P.</b>	<b>BLANCO, JEANNETTE</b>	<b>3901 N. 50 AVE</b>	<b>HOLLYWOOD FL. 33021</b>

**700002366807--5**  
**-12/09/97--01057--011**  
**\*\*\*\*165.00 \*\*\*\*165.00**

8. Name and Address of Current Registered Agent

~~BLANCO, JEANNETTE~~  
~~6730 S.W. 26 CT.~~  
~~MIRAMAR FL 33023~~

9. Name and Address of New Registered Agent

Name  
**HARRY T. OLSTEIN**  
Street Address (P.O. Box Number is Not Acceptable)  
**3901 NORTH 50 AVE**  
Suite, Apt. #, Etc.  
**HOLLYWOOD FL. 3**  
City  
**HOLLYWOOD**  
State  
**FL**  
Zip Code  
**33021**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date **11/18/97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

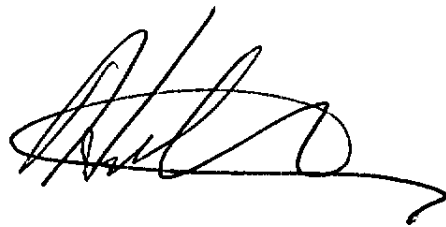
Daytime Phone #

CR2E040 (8/97)

②

WE CALLED IN ON 11/24/97  
ABOUT THE RELOCATION OF THE  
CORPORATION. PLEASE NOTE NEW  
ADDRESS.

THANK YOU.

A handwritten signature in black ink, appearing to be "R. L. O.", with a long horizontal stroke extending to the right.