

4-18-95 83764-C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 18 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000047626 (4)

1. Corporation Name

ICEY A/C, INC.

Principal Place of Business

**4631 NW 31 AVE #290
FT LAUDERDALE FL 33309**

Mailing Address

**4631 NW 31 AVE #290
FT LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/22/1994

3a. Date of Last Report

4. FBI Number

65-0501746

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 **4701 SW 45 ST.**

2a. Mailing Address

26 **4701 SW 45 ST.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 **DAVIE**

27 City & State

28 **DAVIE**

Zip

24 **33329**

Country

25 **USA**

Zip

29 **33329**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**DZUREK, DAN JR
4631 NW 31 AVE #290
FT LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when nameless)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **DZUREK, DAN JR**
STREET ADDRESS **5880 NW 15 ST**
CITY, ST, ZIP **PEMBROKE PINES FL 33313**

TITLE **D**
NAME **DZUREK, MARK W**
STREET ADDRESS **8350 NW 5 STREET**
CITY, ST, ZIP **PEMBROKE PINES FL 33024**

TITLE **D**
NAME **ALI, SHIEK**
STREET ADDRESS **709 PENNSYLVANIA AVE**
CITY, ST, ZIP **FT LAUDERDALE FL 33312**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

**6410 JOHNSON ST.
HOLLYWOOD**

33024

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

DATE

4-10-95

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