

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 19 1997 8:00am
Secretary of State

DOCUMENT # P95000015035 (5)

1. Corporation Name
786 H & H ICE CREAM CORP.



Principal Place of Business
1447 NE 163 STREET
MIAMI BEACH FL 33162

Mailing Address
1447 NE 163 STREET
MIAMI BEACH FL 33162-4624

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

Country

24.

25.

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

29.

30.

3. Date Incorporated or Qualified
02/21/1995

3a. Date of Last Report
04/19/1996

4. FEI Number

65-0584237

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

9. Name and Address of Current Registered Agent

KARIM, MOHAMMED H
4211 SW 53 COURT #E
FT LAUDERDALE FL 33314

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 of Registered Agent required when re-registering)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
D	KARIM, MOHAMMED H	4211 SW 53 CT #EET	FT LAUDERDALE FL 33314	☐ DELETE			
				☐ DELETE			
				☐ DELETE			
				☐ DELETE			
				☐ DELETE			
				☐ DELETE			
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				☐ DELETE			
				☐ DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

14. I do hereby certify that the information reported 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 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

not a record Karim 3/14/97

FILE

Daytime Phone #

0220997

CR2E034 (9/96)