

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000038185 (1)

1. Corporation Name

FAMILY YOGURT & ICE CREAM, INC.



Principal Place of Business

Mailing Address

9479A BOCA GARDENS PKWY.
BOCA RATON FL 33496

9479A BOCA GARDENS PKWY.
BOCA RATON FL 33496

2. Principal Place of Business

2a. Mailing Address

21 5283 W Atlantic

26 Suite, Apt. #, etc.

22 BOCA 156

27 City & State

23 DELRAY BEACH FL

28 Zip

24 33484

25 Country

26 Palm Beach

29 Zip

30 Country

3. Date Incorporated or Qualified

3a. Date of Last Report

05/12/1995

4. FET Number

Applied For

38-3195663

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

D'ONOFRIO, JOSEPH
9479A BOCA GARDENS PKWY.
BOCA RATON FL 33496

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 at the time of filing

81-84 Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME D'ONOFRIO, JOSEPH
STREET ADDRESS 9479A BOCA GARDENS PKWY.
CITY-ST-ZIP BOCA RATON FL 33496

☐ DELETE

TITLE D
NAME BREY, JOSEPH
STREET ADDRESS 9479A BOCA GARDENS PKWY.
CITY-ST-ZIP BOCA RATON FL 33496

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ 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

☐ Change ☐ Addition

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, for or with attachment with an address.

SIGNATURE: *By Joseph D'Onofrio Pres.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 407631-3040
Date: Daytime Phone:

CR2E034 (12/95)