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

PROFIT CORPORATION ANNUAL REPORT



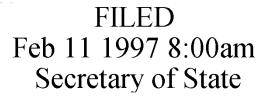
FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<del></del>	195	"	

DOCUMENT # P9500038905 (2)
DOLPHIN ICE COMPANY, INC.



Principal Place 3210 ST. CHAR BOCA RATON	ILES PLACE	Mailing Address 3210 ST CHARLES PLAC BOCA RATON FL 33434 US								
						3. Date Incorporated or Qualified 05/16/1995		ate of Last R 124/1996	eport	
	ace of Business	2a. Mailing Address	·			4. FEI Number	1	Ap	plied For	1
Suite, Apt. i	#. etc.	Suite, Apt. #, etc.				65-0597152	<del></del>	\$8.75 A	ot Applicable	┨
22		27				5. Certificate of Status Desired		Fee Re		
City & State		City & State				6. Election Campaign Financing		\$5.00		1
Zip	Country		Cor	ntry		Trust Fund Contribution		Added t		1
24	[25]	29	30	, <b>y</b>		This corporation has liability for in Florida Statutes	Yes [		. 199.032,	1
	g, Name and Address of Curr	ent Registered Agent		Ε.		10. Name and Address of New Reg	latered	Agent		1
	gs, arthur e			B1	Name					1
	ST CHARLES PLACE			82	Street Addre	ess (P.O. Box Number is Not Acceptab	e)			1
BOC	A RATON FL 33434			83	······································	·				1
					<u> </u>			1251 7	0-4.	1
				84	City		FL	85 Zip (	Code	1
11. Pursuant to office or reagent. Lar	o the provisions of Sections 607.05 egistered agent, or both, in the Sta in familiar with, and accept the obli	502 and 607,1508, Florida Stat te of Florida. Such change was igations of, Section 607,0505, I	lutes, the a s authorize Florida Sta	bove d by tutes	named corporation	oration submits this statement for the poor's board of directors. I hereby accep	rpose o	of changing it pointment as	s registered registered	
SIGNATURE										
<b>}</b>	Signature typed or printed name of registered a OFFICERS A	ngent and title if applicable. (NO NO DIRECTORS		d Age	nt signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE EDC AND	DIDECTOR	C IAI 40	1
TITLE	PD	DELETE	13. 1.1 ft	TLE	<del>- 1</del>	ADDITIONS/CHANGES TO OFFIC	ENS AND	Change	Addition	0000
NAME	BIGGS, ARTHUR	·	1.2 N	AME	į					
STREET ADDRESS	3210 ST. CHARLES PLACE		1.3 \$	TAEET	ADDRESS					1
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 C	TY-S	T-ZIP					
TITLE	DV	DELETE	2.1 TI		ļ			Change	Addition	ľ
NAME	GAGNON, DENNIS	2.2 NAME							1	
STREET ADDRESS	2354 NORTHWEST 110TH S SUNRISE FL	1 IERNAUE	1		ADDRESS					1
CITY-ST-ZIP	DV	DELETE	2. 4 C		ST-ZIP		····	Change	Addition	$\frac{1}{2}$
NAME	BIGGS, WILLIAM	tand person	3.7 N		)			enn +inigh		
STREET ADDRESS	17052 BOCA CLUB BLVD #	1			ADDRESS					1
CITY-ST-ZIP	BOCA RATON FL		3.4. 0	ITY-S	ST-ZIP					
TITLE	DV	DELETE	4.1 7					Change	☐ Addition	
NAME	BIGGS, ARTHUR III		4.21							
STREET ADDRESS	1099 SW 4TH ST BOCA RATON FL		P		ADDRESS					
CITY-ST-ZIP	DOOR NATURE FL	DELETE	4.4 C 5.1 T	ITY-5	I-ZP			Change	Addition	+
NAME }		Las victil	5.1 N		- 1	·		Em Avenigo	MOWO!!	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				ITY-S	1					
TITLE		DELETE	6.1 TI			······································		Change	Addition	1
NAME			6.2 N	AME	ĺ					
STREET ADDRESS			6.3 S	TREET	AODRESS					
CITY-ST-ZIP				ITY-S						
14. I do heret	ry certify that the information supp	fied with this filing does not qui	alify for the	өхө	mption stated	in Section 119.07(3)(i). Florida Statutes	. I furthe	or certify that	the	7

14. I do hereby certify that the information supplied 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 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 33 if changed, or on any litachment with an address.

SIGNATURE

SCHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/14/97

994-1862

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