

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 # P95000044152 (3)

1. Corporation Name

R. P. ICE, INC.



Principal Place of Business

Mailing Address

**C/O MANELLA, KLAPHOLZ & HOCHSZEIN P.A.
2206 HOLLYWOOD BLVD
HOLLYWOOD FL 33020**

**C/O MANELLA, KLAPHOLZ & HOCHSZEIN P.A.
2206 HOLLYWOOD BLVD
HOLLYWOOD FL 33020**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

29

Country

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/08/1995

3a. Date of Last Report

4. FEI Number

65-0598027

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

10. Name and Address of New Registered Agent

**KLAPHOLZ, JOSEPH P
2206 HOLLYWOOD BLVD
HOLLYWOOD FL 33020**

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 the corporation

Signature typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP
DPST
ABRAMOVITCH, FRED
19355 TURNBERRY WAY TH1
N MIAMI BEACH FL 33020**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY- ST- ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

**1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP**

☐ Change ☒ Addition

**VP
Syd Abrams
19355 Turnberry Way TH1
n. Miami Beach, Fl. 33020**

☐ 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

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)(c), 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 address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRED ABRAMOVITCH

4/29/96

Day/Year/Phone #

CR2E034 (12/95)