

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 # **P95000050106 (0)**

1. Corporation Name

E.A.T. ICES OF PSL, INC.



Principal Place of Business

**8974 S.E. SUNFISH PLACE
HOBE SOUND FL 33455**

Mailing Address

**8974 S.E. SUNFISH PLACE
HOBE SOUND FL 33455**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**CLARK, ROBIN L
555 COLORADO AVENUE
HOBE SOUND FL 33455**

3. Date Incorporated or Qualified

06/27/1995

3a. Date of Last Report

4. FET Number

65-0596499

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

81

Name

Edgar F. Pass Jr.

82

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

10425 South Federal Highway

83

84

City

Port St. Lucie

FL

85

Zip Code

34952

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Edgar F. Pass Jr.

2/21/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
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CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

**D
PASS, EDGAR F JR
8974 S.E. SUNFISH PLACE
HOBE SOUND FL 33455
D
PASS, KIM M
8974 S.E. SUNFISH PLACE
HOBE SOUND FL 33455**

☐ DELETE

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13.

1. TITLE
12. NAME
13. STREET ADDRESS
14. CITY, ST, ZIP
2. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP
3. TITLE
32. NAME
33. STREET ADDRESS
34. CITY, ST, ZIP
4. TITLE
42. NAME
43. STREET ADDRESS
44. CITY, ST, ZIP
5. TITLE
52. NAME
53. STREET ADDRESS
54. CITY, ST, ZIP
6. TITLE
62. NAME
63. STREET ADDRESS
64. CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edgar F. Pass Jr., President

2/21/96 (407) 398-8117

CR2E034 (12/95)