

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000070888 (9)

1. Corporation Name

NORTH PALM BEACH ICE CREAM & YOGURT CLUB, INC.



Principal Place of Business

1201 U.S. HIGHWAY ONE
SUITE 6-17
N PALM BEACH FL 33408

Mailing Address

1201 U.S. HIGHWAY ONE
SUITE 6-17
N PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

09/14/1995

4. FEI Number

65-0606749

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MORGAN, ADAM J
% EDWARDS & ANGELL
250 ROYAL PALM WAY, SUITE 300
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

Brestle, Matthew

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

813 Anchorage Drive

83

84 City

North Palm Beach FL

85 Zip Code

33408

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

Matthew Brestle
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

28 April 98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME BRESTLE, MATTHEW
STREET ADDRESS 2691 MIKASA DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE D ☐ DELETE
NAME BRESTLE, DENISE
STREET ADDRESS 2691 MIKASA DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

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

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 813 Anchorage Drive
1.4 CITY-ST-ZIP North Palm Beach, FL 33408

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 813 Anchorage Drive
2.4 CITY-ST-ZIP North Palm Beach, FL 33408

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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: Denise Brestle Denise Brestle 20 April 98 8420760

CR2E034 (10/97)