

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000087903

1. Entity Name
ICEWARE, INC.

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90315 018 ***150.00

00024833



DO NOT WRITE IN THIS SPACE

Principal Place of Business 8603 SOUTH DIXIE HWY. 302-A MIAMI FL 33143		Mailing Address 8603 SOUTH DIXIE HWY. 302-A MIAMI FL 33143	
2. Principal Place of Business PO Box 562636		3. Mailing Address PO Box 562636	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Pinecrest, FL		City & State Pinecrest, FL	
Zip 33256-2636	Country USA	Zip 33256-2636	Country USA

4. FEI Number 65-0620550	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SAINZ, MIGUEL 8603 S DIXIE HWY STE 302A MIAMI FL 33143		7. Name and Address of New Registered Agent Name Miguel Sainz Street Address (P.O. Box Number is Not Acceptable) 12100 SW 68 Avenue City Pinecrest FL Zip Code 33156	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **03-07-2001**
(NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SAINZ, MIGUEL 8603 SOUTH DIXIE HWY., SUITE 302-A MIAMI FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Miguel Sainz 12100 SW 68 Ave, Pinecrest, FL 33156 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SAINZ, MIGUEL 8603 SOUTH DIXIE HWY., SUITE 302-A MIAMI FL 33143 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Miguel Sainz 12100 SW 68 Ave, Pinecrest, FL 33156 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **03-07-2001** **305.889-4848**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

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