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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P96000018738 (0)

DOLPHIN ICE CREAM COMPANY, INC.

Principal Place of Business

Mailing Address

FILED Apr 17 1998 8:00am Secretary of State



9159D S.W. 22ND STREET BOCA RATON FL 33428		P.O. BOX 759031 CORAL SPRINGS FL 33075 US			DO NOT WRITE IN THIS SPACE
		US			3. Date Incorporated or Qualified 02/27/1996
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21 787 Suite, Apt.	11 ARBOR CAKS LAME	26 S A 117 E Suite, Apt #, etc.			65-0647548 Not Applicable
22 # ;	208	27			5. Certificate of Status Desired
City & State 23 BOCA	Country	Cily & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24 334	28 PRIMI BEACH	7 6 E frett 29 30		try	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
MARRS, RUTHANN				B1 Nan	me
9159D S.W. 22ND STREET BOCA RATON FL 33428			L		eet Address (P.O. Box Number is Not Acceptable)
			}	33	
			Ī	34 City	y FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the ab	ove-nam	
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	EUGENE J. MI Signature, typed or protest ment of registered agent	IRFS	Su	21	Musturpfequered when reinstating) DATE DATE
12.	OFFICERS AND		13.	Agent/s gna	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 (1)		Change Addition
NAME	MARRS, RUTHANN		1.2 NA1	Λ Ε	
STREET ADDRESS	9159D S.W. 22ND STREET		1.3 STR	EET ADDRES	ESS
CITY-ST-ZIP	BOCA RATON FL 33428	· · · · · · · · · · · · · · · · · · ·	1.4 CH	-ST-ZIP	
TITLE	D	DELETE	2 1 1170	Į.	Change Addition
NAME	MARRS, EUGENE		2.2 NA	Æ	
STREET ADDRESS	9159 D S.W. 22ND ST		2.3 STR	EET ADDRES	ESS
CITY-ST-ZIP	BOCA RATON FL			Y - ST - ZIP	
TITLE		L_J DLLETE	3.1 TITU		Change Addition
NAME			3.2 NAM		
STREET ADDRESS				EET AUDRES	
CITY-ST-ZIP TITLE		DELETE	3.4. CH 4.1 T/[L	Y-ST-ZIP	Change Addition
NAME			4. 2 NA		Change Cynadion
STREET ADDRESS			a di	eet addres	224
CITY-ST-ZIP				-ST-ZIP	
THILE		DELETE	5.1 1)1		☐ Change ☐ Addition
NAME			52 NAM	16	
STREET ADDRESS			5.3 STR	EET ADDRES	rss
CITY-ST-ZIP			5.4 C(T)	- ST - ZIP	
TITLE		DELETE	6.1 TITE	E	Change Addition
NAME			6.2 NAM	1E	
STREET ADDRESS			63 STR	EET AODRES	rss
CITY-ST-ZIP			6.4 City	-ST-7IP	

14. 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 suppliemental acquait 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 invalidation with an address

4.10-80