


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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000028793 (3)			
1. Corporation Name Flavors Ice Creams + More, Inc.			
Principal Place of Business 15112 Municipal Drive Madeira Beach, FL 33708		Mailing Address PO Box 8973 Madeira Beach, FL 33738	
2. Principal Place of Business 21 15112 Municipal Drive State, Apt. #, etc. 22 City & State 23 Madeira Bch, FL Zip Country 24 33708 25		2a. Mailing Address 26 PO Box 8973 Suite, Apt. #, etc. 27 City & State 28 Madeira Beach FL Zip Country 29 33738 30	
3. Date Incorporated or Qualified 4/2/1996		3a. Date of Last Report 4-2-1996	
4. FEI Number 59-3375787		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81 Name Janet C Luna		82 Street Address (P.O. Box Number is Not Acceptable) 15112 Municipal Drive	
83		84 City Madeira Beach	
85 Zip Code 33708		86	
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 Janet C Luna sec/Treas		DATE 3-30-97	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD 1.2 NAME Luna, Luuro L 1.3 STREET ADDRESS 15112 Municipal Dr 1.4 CITY - ST - ZIP Madeira Beach FL 33708		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
2.1 TITLE STD 2.2 NAME Luna, Janet C 2.3 STREET ADDRESS 15112 Municipal Dr 2.4 CITY - ST - ZIP Madeira Beach, FL 33708		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
14. I do 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.		813-399-9846	
SIGNATURE: Janet C Luna		DATE: 3-30-97	

CR2E034 (9/96)