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PROFIT CORPORATION ANNUAL REPORT

1998

ELORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P96000036080 (5)

FILED Feb 17 1998 8:00am Secretary of State

FROSTY INTERNATIONAL CORP. Principal Place of Business Mailing Address 9974 SOUTHWEST 152ND TERRACE 9974 SOUTHWEST 152ND TERRACE MIAM! FL 33157 MIAMI FL 33157 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0660128 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Bi Name FAUSTO, GUANTE 9974 SW 152 TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33157** 83 84 City 85 Zip Code 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. (NOTE: Registered Agent signature requ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELFTE 1.1 TITLE Change ___ Addition NAME **GUANTE, FAUSTO** 1.2 NAME 9974 SOUTHWEST 152ND TERRACE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 1.4 CITY - ST - ZiP TITLE DELETE 2.1 TITLE Change Addition NAME PATROCINIO, MARGARITA M 22 NAME 9974 SOUTHWEST 152ND TERRACE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33157 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change ___ Addition TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6 2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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:

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