


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

FILED

Mar 30 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 # P96000047944 (9) 1. Corporation Name ICE DREAM ENTERPRISES, INC.					
Principal Place of Business 2100 SWAN LANE SAFETY HARBOR FL 34695		Mailing Address 2100 SWAN LANE SAFETY HARBOR FL 34695			
2. Principal Place of Business 21 2103 DIAMOND COURT Suite, Apt. #, etc. 22 City & State 23 OLDSMAR FLORIDA Zip 24 34677-1948		2a. Mailing Address 26 2103 DIAMOND COURT Suite, Apt. #, etc. 27 City & State 28 OLDSMAR, FL Zip 29 34677-1948		3. Date Incorporated or Qualified 05/31/1996 4. FEI Number 59-3385018 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent STUART, REBECCA A. 2100 SWAN LANE SAFETY HARBOR FL 34695		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2103 DIAMOND COURT 83 84 City OLDSMAR FL 85 Zip Code 34677			
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 Rebecca A. Stuart 3/23/98 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STUART, REBECCA A. 2100 SWAN LANE SAFETY HARBOR FL	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	2103 DIAMOND COURT OLDSMAR FL 34677-1948	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SEARLES, SUSANNE 2100 SWAN LANE SAFETY HARBOR FL	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	2103 DIAMOND COURT OLDSMAR FL 34677-1948	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STUART, ALLAN 2100 SWAN LANE SAFETY HARBOR FL	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	2103 DIAMOND COURT OLDSMAR FL 34677-1948	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)

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:

[Signature]

3/23/98 8:13:29 PM