

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90067 031 ***150.00

DOCUMENT # P96000058243

1. Corporation Name
FLORIDA FREEZZZ, INC.

Principal Place of Business

5590 WAYSIDE DRIVE
SANFORD FL 32771

Mailing Address

5590 WAYSIDE DRIVE
SANFORD FL 32771

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1996

4. FEI Number

59-3387957

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

ARCENEUX, GEORGE
5590 WAYSIDE DRIVE
SANFORD FL 32771

10. Name and Address of New Registered Agent

81 Name Cynthia B Arceneaux

82 Street Address (P.O. Box Number is Not Acceptable)
5590 wayside Dr.

83 Sanford

84 City FL 85 Zip Code 32771

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

Cynthia B. Arceneaux, Pres.

2/28/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME ARCENEUX, GEORGE
STREET ADDRESS 5590 WAYSIDE DRIVE
CITY-ST-ZIP SANFORD FL 32771

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☐ Change ☒ Addition
1.2 NAME Cynthia B. Arceneaux
1.3 STREET ADDRESS 5590 wayside Dr.
1.4 CITY-ST-ZIP Sanford FL 32771

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE:

Cynthia B. Arceneaux

2/28/99

Date

(407)328-0808

Daytime Phone #

CR2E034 (11/98)