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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	JAL REPORT 1998	2° - 7.7	retary of State DF CORPORATIONS	Secretary	of State
DOCU 1. Corporatio	MENT # P960	00070145 (3	3)		
CINDER	RELLA ICE, INC.			I HARAGO HA AKAR AKAR AHAR HAKA AKAR	
Principal Place of Business Mailing Address				4 SPOLLODE SIN MOTOR STATE CONTRACTOR STATE	HONEL ON LAKE CENTE DEPORT MENT HONE
	DERAL HIGHWAY ALE FL 33306	3363-5 N. FEDERAL F FT. LAUDERDALE FL			
FI. DIOUENU	MLE PL 30300	PI, LAUDENDALE PL	33300	DO NOT WRITE IN TH	HIS SPACE
				3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		08/22/1996 4. FEI Number	Applied For
21 26			65-0710863	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 27 City & State City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	1
24	25 g. Name and Address of Cu	29 Prrent Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.	Yes No
FILL	INGS, INC.		81 Name	Siceria Chi	Co la
3732 N.W. 16TH STREET 62 Street Address				dress (P.O. Box Norsber is Not Acceptable)	-
FORT LAUDERDALE FL 33311				65 A mederal	Hary.
			83	we (Smith	Dec 1
			84 City	L / 10 / E	85 Zip Gode
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florida Sta	atutes, the above-named co	rporation submits this statement for the purpos	e of changing its registered
office or r agent. I a	egistered agent, or both, in the 5 m familiar with, and accept the c	State of Florida. Such change with big stinning the state of the state	as authorized by the corpor , Florida Statutes.	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registers OFFICERS	ed agent and title if applicable (S AND DIRECTORS	NOTE Registered Agent signature req	ulred when reinstaling) DAT ADDITIONS/CHANGES TO OFFICERS	
TITLE	DPS	DELETE	1.1 TITLE		Change Addition
NAME	sobeltsyn, sergey v		1.2 NAME		.]
STREET ADDRESS	3327 N.E. 168TH STREET		1.3 STREET ADDRESS		يُّا
CITY-ST-ZIP	NORTH MIAMI BEACH FL		1.4 City-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE 2.2 NAME		☐ Change ☐ Addition C
NAME STREET ADDRESS			2.2 NAME 2.3 STRFET ADDRESS		1
CITY-51-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		4
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		D perete	4.1 TITLE 4.2 NAME		C) Change C Asomori
STREET ADDRESS			4.3 STREET ADDRESS)
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		TT postate	5.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information only true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an enterpresent of empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address. 14. I hereby certify that the information supplied with this filing indicated on this annual report or supplemental any full report of supplemental any full report of the corporation or the receive of truit Block 12 or Block 13 if changed, or on an attach burght with

SIGNATURE:

18.04.98

FILED

May 01 1998 8:00am