DOCUMENT # P970000 1. Entity Name J. P. IGLOO, INC. Principal Place of Business	DO5401 Mailing Address	~			LED 00 8:0	0 am
Principal Place of Business	Mailing Address			Sep 18, 2000 8:00 am Secretary of State 09-18-2000 90047 030 ***550.00		
Principal Place of Business	Mailing Address			09-18-2000 900	47 030 *** 33	5.00
5309 29TH STREET EAST ELLENTON FL 34222	Mailing Address 5309 29TH STREET EAST ELLENTON FL 34222			WAALAALT		
2. Principal Place of Business 5309 2440 Street Eu. Suite, Apt. #, etc.	3. Malling Address 5. 9309 29 Suite, Apt. #, etc.	nstiet E	6.51	DO NOT WRITE IN T	18111 98191 91111 9191 1 81	
Ellenton, Florida	City & State	, Florida		4. FEI Number 65-0720453 Applied For Not Applical		
Zip 34222 Country	2110 34222	Country		5. Certificate of Status Desired	\$8.75 Add Fee Required	
6., Name and Address of Current I	Registered Agent	Name		7. Name and Address of New Registe	red Agent	
PEREZ, MARGARET A.H. 5309 29TH STREET EAST		Street A	Street Address (P.O. Box Number is Not Acceptable)			
ELLENTON FL 34222		City			FL Zip Code	
8. The above named entity submits this statement for	the purpose of changing its		r registered			
SIGNATURE Management Q. A	1. Poren/	E: Registered Agent signal	-	-	ATE	
 9. This corporation is eligible to satisfy its Intangible. Tax filing requirement and elects to do so. (See criteria on back) 	FILE NOW! After SEPTEMBER 1 Make Check Payab	•	be \$750.0	10. Election Campaign Financing Trust Fund Contribution.		D May Be to Fees
11. OFFICERS AND I	/	12.	1	ADDITIONS/CHANGES TO OFFICERS		
TITLE PD NAME VAYDA, TERENCE E STREET ADDRESS 5006 CITY-ST-ZIP BRADENTON FL 34203	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE P NAME PEREZ, JAMES C STREET ADDRESS 101 9TH STREET EAST CITY-ST-ZIP TIERRA VERDE FL 33715	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			Change	Addition C
TITLE VS NAME PEREZ, MARGARET HUSMA STREET ADDRESS 101 9TH STREET EAST CITY-ST-ZIP TIERRA VERDE FL 33715	Delete		Addition margaret Hus Mann Perez 2353 Little Country Rd Parish, FL 34219			- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	770	o connomme	ロ Change 400 310ら	Addition
TITLE . NAME . STREET ADDRESS	Delete	TITLE NAME STREET ADDRESS	30.7		Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
 13. I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee emports changed, or on an attachment with an address, w SIGNATURE: 	true and accurate and that n wered to execute this report	r the exemption sta ny signature shall h as required by Cha	have the san apter 607, Fl	ne legal effect as if made under oath; th lorida Statutes; and that my name appe	at I am an officer o	or director Block 12 if