

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  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90075 023 \*\*\*150.00

DOCUMENT # P97000067549

1. Corporation Name

ICEBOX PRODUCTIONS, INC.

Principal Place of Business

1601 N. 20TH AVE.  
PENSACOLA FL 32503

Mailing Address

1601 N. 20TH AVE.  
PENSACOLA FL 32503

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/29/1997

2. Principal Place of Business

21 200 S. Tarragona St.

Suite, Apt. #, etc.

22 City & State

23 Pensacola, FL

24 Zip Country  
32501 USA

2a. Mailing Address

26 200 S. Tarragona St.

Suite, Apt. #, etc.

27 City & State

28 Pensacola, FL

29 Zip Country  
32501 USA

4. FEI Number

59-3459488

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

9. Name and Address of Current Registered Agent

PANYKO, JOHN A  
30 S. SPRING ST.  
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

81 Name

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

83 200 S. Tarragona St.

84 City

Pensacola

FL

85 Zip Code

32503

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-29-99

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME PANYKO, JOHN A  
STREET ADDRESS 1601 N 20TH AVE  
CITY-ST-ZIP PENSACOLA FL 32503

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 200 S. Tarragona Street  
1.4 CITY-ST-ZIP Pensacola, FL 32501

2.1 TITLE Vice President / Secretary-Treasurer  
2.2 NAME Deborah G. Panyko  
2.3 STREET ADDRESS 200 S. Tarragona Street  
2.4 CITY-ST-ZIP Pensacola, FL 32501

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

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

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

6.1 TITLE  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)