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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000069362 (6)

IT'S - IT ICE CREAM CO. OF FLA.

Principal Place of Business Mailing Address 1333 NIANTIC TERRACE

FILED Jan 27 1998 8:00am Secretary of State



1333 NIANTIC TERRACE WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1997 2. Principal Place of Business 2a. Mailing Address FE! Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Require City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zìo Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HANNA, WALID 1333 NIANTIC TERRACE Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33414 83 Zip Code 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 (NOTE, Registered Agent signature required when reinstating) DATE 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 ñ TITLE DELETE 1.1 TITLE Addition Change HANNA, WALID NAME 1.2 NAME **CR2E034** 1333 NIANTIC TERRACE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition | HANNA, JEAN NAME 2.2 NAME 1333 NIANTIC TERRACE STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE: