

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000070142

1. Entity Name

ICEBURG ENTERTAINMENT INC.

Principal Place of Business

4455 3RD AVE S  
ST PETERSBURG FL 33711

Mailing Address

4455 3RD AVE S  
ST PETERSBURG FL 33711-1130

2. Principal Place of Business

701 18th Street South

Suite, Apt. #, etc.

3. Mailing Address

701 18th Street South

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

Zip

Country

33712

City & State

St. Petersburg, FL

Zip

Country

33712

4. FEI Number

65-0789703

Applied For

Not Applicable.

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HILL, JASPER L JR  
4455 3RD AVE S  
ST PETERSBURG FL 33711

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

CP  
HILL, JASPER L JR  
4455 3RD AVE SO  
ST PETERSBURG FL 33711

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SV  
WILLIAMS, TWILA  
2953 4TH AVE S  
ST PETERSBURG FL 33712

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SV  
WILLIAMS, TWILA  
2953 4TH AVE S  
ST PETERSBURG, FL 33712

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TD  
HILL, EVELYN  
4455 3D AVE S  
ST PETERSBURG FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VD  
LEE, MARIO L  
3234 QUEENSBORO AVE S  
ST PETERSBURG FL 33712

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VD  
LEE, MARIO L  
3234 QUEENSBORO AVE SOUTH  
ST. PETERSBURG, FL 33712

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/00  
Date

Daytime Phone #

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE