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

PROFIT CORPORATION **ANNUAL REPORT**

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000104865 (5) DOCUMENT

ICE BAN HOLDINGS INC.

Principal Place of Business 1201 US HWY ONE. SUITE 205 NORTH PALM BEACH FL 33408 Mailing Address

FILED May 14 1998 8:00am Secretary of State



1201 US HWY ONE. SUITE 205 NORTH PALM BEACH FL 33408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/12/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Capplied For 21 applied Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 Personal Property Tax due June 30. 25 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MARSHALL, RAY 81 1201 US HWY ONE, SUITE 205 82 Street Address (P.O. Box Number is Not Acceptable) **NORTH PALM BEACH FL 33408** 83 84 City Zip Code 85 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 hame of registered agent and the if applicable (NOTE Registered Agent eignature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE __ Change Addition TITLE Janke, George A 1.2 NAME NAME 1201 US HWY ONE, SUITE 205 1.3 STREET ADDRESS STREET ADDRESS **NORTH PALM BEACH FL 33408** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE MARSHALL, RAY NAME 2.2 NAME **1201 US HWY ONE, SUITE 205** STREET ADDRESS 2.3 STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. City - St - ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE 700002526407 NAME 6.2 NAME -05/18/98--01003---027 STREET ADDRESS **6.3 STREET ADDRESS** ***<u>158.75</u> 6.4 City-St-ZiP 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 appears.