

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064819

Entity Name: SANDS OF ICE, INC.

FILED
Feb 28, 2005
Secretary of State

Current Principal Place of Business:

7800 TECHNOLOGY DR
WEST MELBOURNE, FL 32904

New Principal Place of Business:

6734 SHERIDAN ROAD
MELBOURNE VILLAGE, FL 32904

Current Mailing Address:

7699 GREENBORO DRIVE
WEST MELBOURNE, FL 32904

New Mailing Address:

6734 SHERIDAN ROAD
MELBOURNE VILLAGE, FL 32904

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUNSKA, GRACE A
7699 GREENBORO DRIVE
WEST MELBOURNE, FL 32904 US

Name and Address of New Registered Agent:

PUNSKA, GRACE A
6734 SHERIDAN ROAD
MELBOURNE VILLAGE, FL 32904 US

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:

02/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MIXON, CARL E
Address: 7800 TECHNOLOGY DR
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D () Delete
Name: MIXON, SALLY
Address: 7800 TECHNOLOGY DR
City-St-Zip: WEST MELBOURNE, FL 32904

Title: PD () Delete
Name: PUNSKA, GRACE A
Address: 7699 GREENBORO DRIVE
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MIXON, CARL E
Address: 6734 SHERIDAN ROAD
City-St-Zip: MELBOURNE VILLAGE, FL 32904

Title: D (X) Change () Addition
Name: MIXON, SALLY
Address: 6734 SHERIDAN ROAD
City-St-Zip: MELBOURNE VILLAGE, FL 32904

Title: PD (X) Change () Addition
Name: PUNSKA, GRACE A
Address: 6734 SHERIDAN ROAD
City-St-Zip: MELBOURNE VILLAGE, FL 32904

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GRACE A. PUNSKA

PD

02/28/2005

Electronic Signature of Signing Officer or Director

Date