

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085074

1. Entity Name

ICE DREAMS NEW ORLEANS STYLE SHAVED ICE, INC.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90038 044 ***150.00

Principal Place of Business

Mailing Address

1050 SE 15TH ST. #407
FT LAUDERDALE FL 33316

1050 SE 15TH ST. #407
FT LAUDERDALE FL 33316-2134

2. Principal Place of Business

3. Mailing Address

2001 N FEDERAL HWY

ICE DREAMS

Suite, Apt. #, etc.
DEL RAY BCH FL

Suite, Apt. #, etc.
501 S FEDERAL HWY SUITE 302

City & State

City & State
FT LAUDERDALE FL

4. FEI Number
050970495

Applied For
Not Applicable

Zip
33483

Country
US

Zip
33301

Country
US

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

SIMMONS, STEPHEN J
321 SE 15TH AVE
FT LAUDERDALE FL 33301

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
PTD
RAYNOR, RICK
1050 SE 15TH ST. #407
FT LAUDERDALE FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
RAYNOR, RICK
501 S FEDERAL HWY #302
FT LAUDERDALE FL 33301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
O'BRIEN, TIM
1050 SE 15TH ST. #407
FT LAUDERDALE FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
O'BRIEN, TIMOTHY
501 S FEDERAL HWY #302
FT LAUDERDALE FL 33301

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICK RAYNOR PRESIDENT

Date

3/9/00 954-524-1286

Daytime Phone #

CR2E034 (9/99)