

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21463

FILED  
Mar 02, 2006  
Secretary of State

Entity Name: TREASURE COAST ICE SYSTEMS, INC.

## Current Principal Place of Business:

408 FARMER'S MARKET ROAD  
FORT PIERCE, FL 34982

## New Principal Place of Business:

## Current Mailing Address:

408 FARMER'S MARKET ROAD  
FORT PIERCE, FL 34982

## New Mailing Address:

FEI Number: 59-3055110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIRANDA, DON J  
408 FARMERS MARKET RD.  
FORT PIERCE, FL 34982 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MIRANDA, DON J.,  
Address: 408 FARMER'S MARKET RD.  
City-St-Zip: FORT PIERCE, FL

Title: OV ( ) Delete  
Name: FUNGONE, MARY A  
Address: 1124 SE PROCTOR LANE  
City-St-Zip: PT ST. LUCIE, FL

Title: OS ( ) Delete  
Name: MIRANDA, MIHCAEL  
Address: 1130 SE PROCTOR LANE  
City-St-Zip: PT ST. LUCIE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: OS (X) Change ( ) Addition  
Name: MIRANDA, MICHAEL  
Address: 1130 SE PROCTOR LANE  
City-St-Zip: PT ST. LUCIE, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DON J MIRANDA

D

03/02/2006

Electronic Signature of Signing Officer or Director

Date