2002 UNIFORM BUSINESS REPORT (UBR)

13. I hereby certify that the informatic indicated on this report of supple

of the corporation or the changed, or on an attack

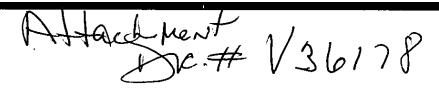
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th this filing doe is true and acc

Sep 16, 2002 8:00 am Secretary of State V36178 DOCUMENT # 1. Entity Name 09-16-2002 90091 025 ***150.00 TROPICAL FLAVORS ICE CREAM INC. Principal Place of Business Mailing Address HUISBAID 2021 S.W. 70TH AVENUE 2021 S.W. 70TH AVENUE B-13 **B-13** DAVIE FL 33317 DAVIE FL 33317 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0336697 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KASTNER, JEFFREY D Street Address (P.O. Box Number is Not Acceptable) 10011 PINES BLVD. SUITE \$\$103 PEMBROKE PINES FL 33319-5876 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPT (4/02)TITLE ☐ Delete TITLE ☐ Change Addition RUSSELL, ERROL NAME NAME STREET ADDRESS 2021 S.W. 70TH AVENUE CR2E034 STREET ADDRESS DAVIE FL 33317 CITY-ST-ZIP CITY-ST-ZIP **VS** TITLE ☐ Delete TITLE Change Addition REID, LENWORTH A NAME NAME 7770 N.W. 70TH AVE. STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12

FILED





2021 S.W. 70th Ave. B-13 Davie, FL 33317 (305) 370-2666 FAX 474-2524 1-800-281-5649

To Whom It May Concern:

Our Corporation, Tropical Flavors Ice Cream Inc., located at 2021 — SW 70th Avenue, B-13, Davie, FL 33317, Document #: V36178, did not receive a prior notice for renewal. We are asking the

Division of Corporations to waive the late fee. Thank You.

Lenworth Reid Vice President (954) 325-9778