

FILED

May 16 1997 8:00am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V67486

(3)

1. Corporation Name
FROSTY, INC.

Principal Place of Business

130 NORTH PARK RD
STE 801
HOLLYWOOD FL 33021
J8

Mailing Address

450 NORTH PARK RD
STE 801
HOLLYWOOD FL 33021-6936
US

3. Date Incorporated or Qualified

09/23/1992

3a. Date of Last Report

12/08/1996

4. FEI Number

65-0357160

Applied For

Not Applicable

5. Certificate of Status Dated

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 109.032,
Florida Statutes

Yes No

2. Principal Place of Business

2a. Mailing Address

1
Suite, Apt. #, etc.2b
Suite, Apt. #, etc.2
City & State2c
City & State3
Zip Country2d
Zip Country

9. Name and Address of Current Registered Agent

GARLIN, GENE A.
450 NORTH PARK RD
STE 801
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1501, 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 name of registered agent and this if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

D
NAME
GARLIN, GENE A.
STREET ADDRESS
450 N PARK RD / STE 805
CITY-ST-ZIP
HOLLYWOOD FL

1.2 NAME

P
NAME
GARLIN, JEFFREY T
STREET ADDRESS
450 N PARK ROAD / STE 805
CITY-ST-ZIP
HOLLYWOOD FL

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change Addition

400002195914

-05/30/97--01034--049

***165.00

14. I do 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 address.

SIGNATURE: