

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F21000002318

**Entity Name:** SNAP FLORIDA INC.

**Current Principal Place of Business:**

3000 31ST ST.  
SANTA MONICA, CA 90405

**Current Mailing Address:**

3000 31ST ST.  
SANTA MONICA, CA 90405 US

**FEI Number:** 45-5452795

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title DIRECTOR  
Name LYNTON, MICHAEL  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name COLES, JOANNA  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name VARGAS, FIDEL  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name COFFEY, KELLY  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name JENKINS, LIZ  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title AS  
Name PORWAL, ATUL  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name MERESMAN, STANLEY  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR  
Name MILLER, SCOTT  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE:** ATUL PORWAL

**ASSISTANT SECRETARY**

**02/15/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name THORPE, POPPY  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR, OFFICER  
Name MURPHY, ROBERT  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title OFFICER  
Name HUNTER, JERRY  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title OFFICER  
Name O'SULLIVAN, MICHAEL  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title DIRECTOR, CEO  
Name SPIEGEL, EVAN  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title CFO  
Name ANDERSEN, DEREK  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405

Title OFFICER  
Name MORROW, REBECCA  
Address 3000 31ST ST.  
City-State-Zip: SANTA MONICA CA 90405