

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 642304

(0)

1. Corporation Name

THE SPICED APPLE, INC.



Principal Place of Business

3281 GRIFFIN RD.
FORT LAUDERDALE FL 33312

Mailing Address

3281 GRIFFIN RD.
FORT LAUDERDALE FL 33312

3. Date Incorporated or Qualified
10/19/1979

3a. Date of Last Report
07/11/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1965765

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JENNINGS, EDWARD J.
200 SE 18TH CT
FORT LAUDERDALE FL 33316

81 Name

Edmund L. Wood

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

2041 NW 74 Ave.

83

84 City

SUNRISE

FL

85 Zip Code

33313

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.1508, Florida Statutes.

SIGNATURE

Signature type: *[Signature]*

Edmund L. Wood

Edmund L. Wood

6-9-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME AIELLO, JAMES L.
STREET ADDRESS 3210 N.E. 58TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL

1.1 TITLE PRESIDENT & DIRECTOR
1.2 NAME JAMES L. AIELLO
1.3 STREET ADDRESS 212 WINDWARD WAY
1.4 CITY-ST-ZIP NICEVILLE, FL. 32578

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 to an address.

SIGNATURE:

[Signature] James L. Aiello (Pres.)

6/6/96

954-962-075

CR2E034 (12/95)