

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000001533 (8)

1. Corporation Name

SALICKNET, INC.



Principal Place of Business

8201 BEVERLY BLVD.
LOS ANGELES CA 90048

Mailing Address

8201 BEVERLY BLVD.
LOS ANGELES CA 90048

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

STOCKER, JOEL L
% GREENBERG TRAURIG
1221 BRICKELL AVE.
MIAMI FL 33131

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

03/28/1994

3a. Date of Last Report

06/30/1995

4. FEI Number

95-4459974

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

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or Printed Name of Registered Agent or Director)

(Printed) Registered Agent Signature (Typed or Printed Name)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CPD
NAME SALICK, BERNARD
STREET ADDRESS 8201 BEVERLY BLVD.
CITY-STATE-ZIP LOS ANGELES CA 90048

☐ DELETE

1.1 TITLE V
1.2 NAME HUNDAY, BLAIR
1.3 STREET ADDRESS 8201 Beverly Blvd
1.4 CITY-STATE-ZIP Los Angeles, CA 90048

☐ Change

☒ Addition

TITLE VSTD
NAME BELL, LESLIE F
STREET ADDRESS 8201 BEVERLY BLVD.
CITY-STATE-ZIP LOS ANGELES CA 90048

☐ DELETE

2.1 TITLE V
2.2 NAME LAMACCHIA, ANTHONY
2.3 STREET ADDRESS 8201 Beverly Blvd
2.4 CITY-STATE-ZIP Los Angeles, CA 90048

☐ Change

☒ Addition

TITLE VD
NAME FIORE, MICHAEL T
STREET ADDRESS 8201 BEVERLY BLVD.
CITY-STATE-ZIP LOS ANGELES CA 90048

☐ DELETE

3.1 TITLE V
3.2 NAME KURONSKI, BETTINA
3.3 STREET ADDRESS 8201 Beverly Blvd
3.4 CITY-STATE-ZIP Los Angeles, CA 90048

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

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

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

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

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

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

☐ Change

☐ Addition

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 with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LESLIE F. BELL

4-10-96

213-966-3810

Date

Day/Time Phone #

CR2E034 (12/95)