

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 # K28915

(2)

1. Corporation Name

SPID COMPANY, INC.



Principal Place of Business

% JOHN SULLIVAN
801 BRICKELL AVE. SUITE 1301
MIAMI FL 33131-9902

Mailing Address

% JOHN SULLIVAN
801 BRICKELL AVE. SUITE 1301
MIAMI FL 33131-9902

3. Date Incorporated or Qualified
07/20/1988

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 701 Brickell Avenue

26 701 Brickell Avenue

Suite, Apt #, etc.

Suite, Apt #, etc.

22 Suite 850

27 Suite 850

City & State

City & State

23 Miami, Florida

28 Miami, Florida

Zip

Country

Zip

Country

24 33131

25 USA

29 33131

30 USA

4. FEI Number

65-0120099

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

9. Name and Address of Current Registered Agent

SULLIVAN, JOHN
2600 GRANADA BLVD
CORAL GABLES FL

81 Name

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

701 Brickell Avenue

83

Suite 850

84 City

Miami

FL

85

Zip Code

33131

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 of registered agent or officer and then applicable

Signature of Agent (signature required when submitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPS	☐ DELETE
NAME	SULLIVAN, JOHN	
STREET ADDRESS	2600 GRANADA BLVD	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	701 Brickell Avenue, Suite 850
14 CITY-ST-ZIP	Miami, Florida 33131
2. TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
3. TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
4. TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
6. TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***5000.00

REB
5-1-96

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: John S. Sullivan/ Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/96

(305) 381-8340

CP2E034 (12/95)