

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:14

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # M38850

(7)

1. Corporation Name

SPAULDINGS INTERNATIONAL, INC.

Principal Place of Business

**5727 NW 7TH ST
MIAMI FL 33126
US**

Mailing Address

**5727 NW 7TH ST
MIAMI FL 33126
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
09/23/1986

3a. Date of Last Report
05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-2714061

Applied For

☐ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip Country

Zip Country

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☐ No

24

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8. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

**MIRCHANDANI, PETER N
7861 SW 53RD AVENUE
MIAMI FL 33143**

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 607.1508, 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 and fee if applicable

NOTE: Registered Agent signature required when re-electing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PDS
NAME	MIRCHANDANI, PETER N.
STREET ADDRESS	7861 SW 53RD AVE
CITY - ST - ZIP	MIAMI FL
TITLE	VP
NAME	MIRCHANDANI, NIRMALA B.
STREET ADDRESS	7861 SW 53RD AVE
CITY - ST - ZIP	MIAMI FL
TITLE	VD
NAME	BREAULT, BINA
STREET ADDRESS	7009 SW 115TH PLACE
CITY - ST - ZIP	MIAMI FL
TITLE	VD
NAME	MIRCHANDANI, NEIL
STREET ADDRESS	7861 SW 53RD AVE
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
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 110.07(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 this 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 of Block 13 if changed or on an attachment with an address.

SIGNATURE:

PETER N MIRCHANDANI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95

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