

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 # **P93000024838 (3)**

1. Corporation Name

SPREENFIELD HOLDINGS, INC.



Principal Place of Business

**701 BRICKELL AVENUE
SUITE 1800 (RFH)
MIAMI FL 33131**

Mailing Address

**801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131**

3. Date Incorporated or Qualified

04/02/1993

3a. Date of Last Report

04/27/1995

4. FEI Number

65-0404311

Applied For

☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 **701 Brickell Avenue**

Suite, Apt. #, etc.

Suite 850

22 City & State

27 City & State
Miami, Florida

24 Zip

25 Country

29 **33131**

30 **USA**

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

9. Name and Address of Current Registered Agent

**SULLIVAN, JOHN S
801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

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

701 Brickell avenue

83 **Suite 850**

84 City **Miami**

85 **FL**

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 person authorized to file this statement on behalf of the corporation

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVENUE, SUITE 1301**
CITY-STATE-ZIP **MIAMI FL 33131**

TITLE ☐ DELETE

NAME **V SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVENUE, SUITE 1301**
CITY-STATE-ZIP **MIAMI FL 33131**

TITLE ☐ DELETE

NAME **S SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVENUE, SUITE 1301**
CITY-STATE-ZIP **MIAMI FL 33131**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS **701 Brickell Avenue, Suite 850**
14 CITY-STATE-ZIP **Miami, Florida 33131**

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS **701 Brickell avenue, Suite 850**
24 CITY-STATE-ZIP **Miami, Florida 33131**

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS **701 Brickell Avenue, Suite 850**
34 CITY-STATE-ZIP **Miami, Florida 33131**

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS **700001816857**
54 CITY-STATE-ZIP **-05/10/96--01040--004**
*****5000.00**

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-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 Book 12 or Book 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

Date

Telephone Number

CR2E034 (12/95)