## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

P93000036995 (7)

SPICEMAN, INC.

## **FILED** Feb 19 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address										1 14811981 118 (BIBS 11111 SAIII SEIII S	/B ( )	ing Allia in	TEM ENTE	DI MINI (MA)	
1226 JEFFERSON ST 1226 JEFFERSON ST															
	HOLLYWOOI	D FL 33019-1	807	но	HOLLYWOOD FL 33019-1807					DO NOT WIDITE IN THIS COLOR					
									F	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
					<u>.</u>					05/24/1993					
	2. Principal Place of Business				2a. Mailing Address					4. FEI Number			App	lied For	
21	Cuite Ant	# -1-		26	· . · · · · · · · · · · · · · · · · · ·					65-04 16628			Not	Applicable	
L	Suite, Apt. #, etc.			<del>}</del> ,	Suite, Apt. #, etc.					5. Certificate of Status Desired				dditional	
22	City & State				City & State									julred	
23	<b>-</b>			<del> </del>	<del></del>					Election Campaign Financing \$5.00 May Be					
23	Zip Country				Zip Country					Trust Fund Contribution	<u> </u>	<del></del>		Fees	
24		25 29 30				<b>├</b> つ	n '			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
.7		9, Name and Address of Current Régistered Agent				1301				10. Name and Address of New Registered Agent					
HOVER, ROBERT							81 Name				gioloida	Agoin.			
1228 JEFFERSON ST															
			FL 33019-1807					Street A	Address	(P.O. Box Number is Not Acceptal	ole)				
1102211100012 33018-1807															
						i	83								
							84	City			FL	_ [ ]	Zip Ço		
11	. Pursuant	to the provis	ions of Sections 607	.0502 and 607.	1508, Florida Statu	ites, the at	OVE	e-named o	corpora	tion submits this statement for the ps board of directors. I hereby acce	ourpose o	f changir	ng its	reaistered	
	office or r	regi <b>ste</b> red ag mi <b>fam</b> iliar w	jent, or both, in the S ith, and accept the c	State of Florida. Obligations of, S	Such change was ection 607.0505. F	authorized Iorida Stati	i by utes	the corp	oration'	s board of directors. I hereby acce	ot the app	ointment	as re	gistered	
	GNATURE		, ,			nonou otu		•							
31	GINATORL	Signature, typed	or printed name of registers	ed agent and title if ar	pplicable (NO	TE: Registered	Age	int signature r	required w	hen reinstating)	DATE	<del></del>			
12			OFFICERS	AND DIRECTO		13.				ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECT	<b>FORS</b>	IN 12	
TIT	LE	D			☐ DELE <b>te</b>	1.1 TIT	LE					☐ Chan	ge	☐ Addition	
NA	4000 IFFFFBOOM OT					1.2 NAME									
STE	STREET ADDRESS 1226 JEFFERSON ST CITY-ST-ZIP HOLLYWOOD FL 33019-180				1.3 ST			ADDRESS							
	Y-ST-ZIP	HULLY	MOOD FF 33018-	1807		1.4 CIT	Y - \$1	T-ZIP							
TIT	LE				☐ DELETE		LE					Chan	ge	Addition	
NAI	ME					2.2 NA	ME								
STF	REET ADORESS					2.3 STI	REET	ADDRESS							
	Y-ST-ZIP			-	<u> </u>	2. 4 CI	ry-S	IT-ZIP							
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NAM						4. 2 NA	ME								
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STR	EET ADDRESS					6.3 STR	EET A	ADDRESS						1	
CITY	(-\$T-ZIP					6.4 CIT	r•st	- ZIP							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Z/1= 100