

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 # **P93000043061 (9)**

1. Corporation Name

SPL, INC.



Principal Place of Business

Mailing Address

~~95 So. Federal Hwy. #200~~
~~BOCA RATON FL 33432~~
95 So. Federal Hwy. #200
BOCA RATON FL 33432

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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30

9. Name and Address of Current Registered Agent

SONGY, DAVID B

~~2424 N FEDERAL HWY~~ **95 So. Federal Highway**
~~SUITE 201~~ **Suite #200**
~~BOCA RATON FL 33432~~ **BOCA RATON FL 33432**

3. Date Incorporated or Qualified

06/18/1993

3a. Date of Last Report

04/26/1995

4. FEI Number

65-0417543

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

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\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

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Yes

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No

10. Name and Address of New Registered Agent

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 the date of signature

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **GRETENSTEIN, STEVEN R**
STREET ADDRESS **% 2424 N FEDERAL HWY SUITE 201**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐

Change

☒

Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TODD NOCERINI

c/o 95 So. Federal Hwy. #200

Boca Raton, FL 33432

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SIGNATURE:

TODD NOCERINI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

40

Daytime Phone

CR2E034 (12/95)