

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

FILED
Jan 24 1996 8:00 am
Secretary of State

DOCUMENT # P94000033699 (7)

1. Corporation Name

S.P.S. TECHNOLOGIES CORPORATION

Principal Place of Business

Mailing Address

ONE CYPRESS PLACE, SUITE 302
701 W. CYPRESS CREEK RD.
FT. LAUDERDALE FL 33309

ONE CYPRESS PLACE, SUITE 302
701 W. CYPRESS CREEK RD.
FT. LAUDERDALE FL 33309

3. Date Incorporated or Qualified

04/28/1994

3a. Date of Last Report

01/30/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0494358

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLUGEL, WALTER
701 W CYPRESS CREEK RD
SUITE 302
FORT LAUDERDALE FL 33309

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
EVP
CANTOR, JAUN
STREET ADDRESS
2800 ISLAND BLVD #1904
CITY-STATE-ZIP
WILLIAMS ISLAND FL

1.1 TITLE ☒ Change ☐ Addition

NAME
CANTOR, JUAN
STREET ADDRESS
2800 ISLAND BLVD. # 1904
CITY-STATE-ZIP
Williams Island FL 33160

TITLE ☐ DELETE

NAME
M
FLOGEL, WALTER
STREET ADDRESS
6237 SWEET MAPLE LANE
CITY-STATE-ZIP
BOCA RATON FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.4 CITY-STATE-ZIP

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUAN CANTOR

JAN 19-96

(954) 443-9811

Date

Daytime Phone #

CR2E034 (12/95)