

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 # P94000057528 (9)

1. Corporation Name

SPICED APPLE PRODUCTIONS, INCORPORATED



Principal Place of Business

1485 N.E. 121ST ST., #406
NORTH MIAMI FL 33161

Mailing Address

1485 N.E. 121ST ST., #406
NORTH MIAMI FL 33161

3. Date Incorporated or Qualified

08/03/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0569531

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21 6770 S.W. 9th Street
Suite, Apt. #, etc.

26 6770 S.W. 9th Street
Suite, Apt. #, etc.

23 City & State
Pembroke Pines, FL

28 City & State
Pembroke Pines, FL

24 Zip
33023

29 Zip
33023

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HILTON, BEVERLY A
1485 N.E. 121ST ST., #406
NORTH MIAMI FL 33161

81 Name

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

6770 S.W. 9th Street

83

84 City
Pembroke Pines, FL

85 Zip Code
33023

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

Beverly A. Hilton
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

23 April 96
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTM
HILTON, BEVERLY
1485 N.E. 121ST ST., #406
NORTH MIAMI FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VSC
HILTON, RICHARD W
1485 N.E. 121ST ST., #406
NORTH MIAMI FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☒ Change ☐ Add-on
6770 S.W. 9th Street
Pembroke Pines, FL 33023

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☒ Change ☐ Add-on
6770 S.W. 9th Street
Pembroke Pines, FL 33023

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Add-on

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Add-on

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Add-on

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Add-on

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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Beverly A. Hilton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 April 96
Date

954-
962-3400
Daytime Phone

CR2E034 (12/95)