

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RESTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT
Sandra B. Morth
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000042822 (3)

1. Corporation Name

SPIELMAN ENTERPRISES, INC.

Principal Place of Business

Mailing Address

40310 FISHER ISLAND DR.
FISHER ISLAND FL 33109

40310 FISHER ISLAND DR.
FISHER ISLAND FL 33109

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt #, etc.

Suite, Apt #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MCDONALD, JAMES W JR.
MCDONALD & ASSOC., ATTORNEYS AT LAW, CHRTD
15600 SW 288 ST., STE. 306
HOMESTEAD FL 33033

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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]

12. OFFICERS AND DIRECTORS

TITLE	DP	DELETE
NAME	SPIELMAN, GERALD	
STREET ADDRESS	40310 FISHER ISLAND DR.	
CITY - ST - ZIP	FISHER ISLAND FL 33109	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - 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 I were empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STATE

IONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 16 PM 12:38



3. Date Incorporated or Qualified

06/02/1995

3a. Date of Last Report

4. FEI Number

22-3436070

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☐

No

10. Name and Address of New Registered Agent

Name

GERALD SPIELMAN

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

40310 FISHER ISLAND DR

City

Fisher Island

FL

85

Zip Code

33109

I, the named corporation submits this statement for the purpose of changing its registered agent. I, the corporation's board of directors, hereby accept the appointment as registered agent.

Signature (required when filing)

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1	NAME	50000155723
2	STREET ADDRESS	09/26/96-01039-010
3	CITY - ST - ZIP	****225.00 ****225.00
4	NAME	
5	STREET ADDRESS	
6	CITY - ST - ZIP	
7	NAME	
8	STREET ADDRESS	
9	CITY - ST - ZIP	
10	NAME	
11	STREET ADDRESS	
12	CITY - ST - ZIP	
13	NAME	
14	STREET ADDRESS	
15	CITY - ST - ZIP	
16	NAME	
17	STREET ADDRESS	
18	CITY - ST - ZIP	
19	NAME	
20	STREET ADDRESS	
21	CITY - ST - ZIP	
22	NAME	
23	STREET ADDRESS	
24	CITY - ST - ZIP	
25	NAME	
26	STREET ADDRESS	
27	CITY - ST - ZIP	
28	NAME	
29	STREET ADDRESS	
30	CITY - ST - ZIP	

I, the named corporation submits this statement for the purpose of changing its registered agent. I, the corporation's board of directors, hereby accept the appointment as registered agent.

7/16/96 305535679

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