Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90196 043 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000069626

1. Corporation Name

SPALTER CORPORATION

Principal Place of Business    Mailing Address   1123 NE. 163RD STREET   124 Ne. 163RD STREET   125 NE. 163RD STREET   126 Ne. 142 Ne.							
NORTH MIAMI BEACH FL 33162  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  08/21/1996  4. FEI Number  65-0717136  Suite, Apt. #, etc.  21  227  Suite, Apt. #, etc.  227  City & State  3. Election Campaign Financing  7. Fee Required  Added to Fees  Added to Fees  Added to Fees  Added to Fees  North MIAMI BEACH FL 33162  3. Date Incorporated or Qualified  08/21/1996  Not Applicable  \$3. 75 Additional  Fee Required  \$5.00 May Be  Added to Fees  Added to Fees  Added to Fees  No Incorporation owes the current year Intangialle  Personal Property Tax.   Ves   No  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  NORTH MIAMI BEACH FL 33162  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Floridas Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In an farplister willy, and accept the obligations of, Section 807.0505, Floridas Statutes, Section 807.0505, Floridas Statute	Principal Place of Business Mailing Address					( /EBUSER HE CALL BUIL BOILS BEIN BOILD BOILE BILL BUILD BILL BUILL BILL	
2. Principal Place of Business 2. 2a. Mailing Addross 2. 4. FEI Number 5. Optical Place of Business 2. 2a. Mailing Addross 3. 4. FEI Number 5. Optication Suite, Apt. #, etc. 2b. 65-0717136	1720 1821 14412 011121			62		DO NOT WRITE IN THIS SPACE	
21] 26   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   S. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Additional							
Suite, Apt. #, etc.    Suite, Apt. #, etc.	2. Principal P	lace of Business	2a: Mailing Address		-	4. FEI Number Applied For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.	21		26			65-0717136   Not Applicable	
City & State    City & State   City & City	Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				LE Cortifesto of Status Desired	
Zip Country Zip Country Zip Country Sip Sign Sign Sign Sign Sign Sign Sign Sign	City & State City & State						
9. Name and Address of Current Registered Agent  SPALTER, YITZCHOK 1123 N.E. 163RD STREET NORTH MIAMI BEACH FL 33162  82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  D  OFFICERS AND DIRECTORS IN 12  TITLE  D  Change  Addition  Change  Addition  Change  Addition  Change  Addition	Zip	_ ′	<u> </u>	_	ry		
SPALTER, YITZCHOK 1123 N.E. 163RD STREET NORTH MIAMI BEACH FL 33162  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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Sign layls, typed or printed name of registered agent and tilb if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DELETE  1.1 TITLE  Change  Addition  Addition  Change  Addition  Addition  Change  Addition							
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SIGNATURE UPAGE   TZCHOK SATUTEN   REC. ACT	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.						
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE D DELETE 1.1 TITLE Change Addition  NAME SPALTER, YITZCHOK 12 NAME  STREET ADDRESS 1123 N.E. 163RD STREET 13 STREET ADDRESS 14 CITY-ST-ZIP  TITLE DELETE 2.1 TITLE Change Addition  ORTH MIAMI BEACH FL 33162 Addition	SIGNATURE USUALTED YITZCHOK SPAITER REG AGT. 4/19/97						
NAME SPALTER, YITZCHOK 1.2 NAME STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 1.4 CITY-ST-ZIP  TITLE DELETE 2.1 TITLE Change Addition	12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 113 STREET ADDRESS 14 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition	TITLE	D	☐ DELETÉ	1.1 TITU	:	☐ Change ☐ Addition	
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162 14 CITY-ST-ZIP Change Addition	NAME			1.2 NAM	<b></b>		
TITLE DELETE 2.1 TITLE Change Addition	STREET ADDRESS			1.3 STRE	ET ADDRE	DRESS	
THE 29 MAYE	CITY-ST-ZIP			1.4 CITY	-ST-ZIP		
NAME 22 NAME	TITLE		☐ DELETE	2.1 11111	Ē	Change Addition	
STOREST ADDRESS	NAME .	* * *.*	v . 145			NOTICE .	

6.4 CITY-ST-ZIP CITY-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, with all other like empowered.

2. 4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CiTY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE 3.2 NAME

4,1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

SIGNATURE:

1. V

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CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

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CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

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