

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90079 034 ***150.00

DOCUMENT # P99000072849

1. Entity Name
SPERIN, INC.



Principal Place of Business
**13410 S. SHORE BLVD.
WELLINGTON FL 33414**

Mailing Address
**13410 S. SHORE BLVD.
WELLINGTON FL 33414**

2. Principal Place of Business

3. Mailing Address

40 RZ CAPITAL LLC

Suite, Apt. #, etc.

Suite, Apt. #, etc.

40 EAST 52ND ST. 23RD FLOOR

City & State

City & State

NEW YORK, NY

Zip

Country

Zip

Country

10022

USA

4. FEI Number

65-0951302

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NUNLEY, E S
500 AUSTRALIAN AVENUE SOUTH, 9TH FLOOR
WEST PALM BEACH FL 33401**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PD HIRSCH, NEIL**
STREET ADDRESS **13410 S. SHORE BLVD.**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE ☒ Change ☐ Addition
NAME **PD HIRSCH, NEIL**
STREET ADDRESS **40 RZ CAPITAL LLC 40 EAST 52ND ST. 23 FL**
CITY-ST-ZIP **NEW YORK NY 10022**

TITLE ☐ Delete
NAME **S RAPPAPORT, STEVEN**
STREET ADDRESS **13410 S. SHORE BLVD.**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE ☒ Change ☐ Addition
NAME **S RAPPAPORT, STEVEN**
STREET ADDRESS **RZ CAPITAL LLC 40 EAST 52ND ST. 23RD FL**
CITY-ST-ZIP **NEW YORK, NY 10022**

TITLE ☐ Delete
NAME **T ZIMMERMAN, ALAN**
STREET ADDRESS **13410 S. SHORE BLVD.**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE ☒ Change ☐ Addition
NAME **T ZIMMERMANN ALAN**
STREET ADDRESS **RZ CAPITAL LLC 40 EAST 52ND ST. 23 FL**
CITY-ST-ZIP **NEW YORK NY 10022**

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/03
Date

212-906-9000
Daytime Phone #