

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003932

Entity Name: WALTER KARL, INC.

**Current Principal Place of Business:**

2 BLUE HILL PLAZA,3RD FLOOR  
PEARL RIVER, NY 10965

**Current Mailing Address:**

1020 EAST 1ST STREET  
PAPILLION, NE 68046 US

FEI Number: 13-1662576

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DIRECTOR  
Name IACCARINO, MIKE  
Address 13155 NOEL ROAD  
SUITE 1750  
City-State-Zip: DALLAS TX 75240

Title DIRECTOR  
Name LAMB, STEVE  
Address 55 EAST 52ND STREET  
34TH FLOOR  
City-State-Zip: NEW YORK NY 10055

Title VICE PRESIDENT & SECRETARY  
Name LAMB, STEVE  
Address 55 EAST 52ND STREET  
34TH FLOOR  
City-State-Zip: NEW YORK NY 10055

Title CFO  
Name OWENS, AUSTIN  
Address 13155 NOEL ROAD  
SUITE 1750  
City-State-Zip: DALLAS TX 75240

Title CEO  
Name IACCARINO, MIKE  
Address 13155 NOEL ROAD  
SUITE 1750  
City-State-Zip: DALLAS TX 75240

Title PRESIDENT  
Name IACCARINO, MIKE  
Address 13155 NOEL ROAD  
SUITE 1750  
City-State-Zip: DALLAS TX 75240

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

SIGNATURE: MIKE IACCARINO

PRESIDENT

05/30/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date