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May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G29808** (4)
1. Corporation Name
SPEAR DEVELOPMENT CORP.



Principal Place of Business: 3901 SW 47 AVE, STE 408, FT LAUDERDALE FL 33314-4030, US

Mailing Address: 3901 SW 47 AVE, STE 408, FT LAUDERDALE FL 33314-2815, US

3. Date Incorporated or Qualified: 03/10/1983
3a. Date of Last Report: 04/15/1996

4. FEI Number: 59-2284446
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 Office: 3721 S. W. 47th AVE., SUITE 307, FT. LAUDERDALE, FL 33314

2a. Mailing Office: 3721 S. W. 47th AVE., SUITE 307, FT. LAUDERDALE, FL 33314

22. City & State: FT. LAUDERDALE, FL 33314

23. City & State: FT. LAUDERDALE, FL 33314

24. Zip: Country: FT. LAUDERDALE, FL 33314

9. Name and Address of Current Registered Agent
SPEAR, DAVID A
3901 SW 47 AVE
STE 408
FT LAUDERDALE FL 33314

10. Name and Address of New Registered Agent
81 Name: SPEAR, DAVID A.
82 Street Address (P.O. Box Number is Not Acceptable): 3721 S.W. 47 Avenue
83 Street: STE 307
84 City: FT LAUDERDALE FL 85 Zip Code: 33314

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: *[Signature]* DATE: 4/29/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PTD	<input type="checkbox"/> DELETE	1.1 TITLE: PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: SPEAR, L. WILLIAM		1.2 NAME: SPEAR, L. WILLIAM	
STREET ADDRESS: 3901 SW 47 AVE, STE 408		1.3 STREET ADDRESS: 3721 SW 47th AVE STE 307	
CITY-ST-ZIP: FT LAUDERDALE FL		1.4 CITY-ST-ZIP: FT. LAUDERDALE, FL 33314	
TITLE: VSD	<input type="checkbox"/> DELETE	2.1 TITLE: VSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: SPEAR, JEFFREY		2.2 NAME: SPEAR, JEFFREY	
STREET ADDRESS: 3901 SW 47 AVE, STE 408		2.3 STREET ADDRESS: 3721 SW 47th AVE STE 307	
CITY-ST-ZIP: FT LAUDERDALE FL		2.4 CITY-ST-ZIP: FT. LAUDERDALE, FL 33314	
TITLE: VD	<input type="checkbox"/> DELETE	3.1 TITLE: VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: SPEAR, DAVID A.		3.2 NAME: SPEAR, DAVID A.	
STREET ADDRESS: 3901 SW 47 AVE, STE 408		3.3 STREET ADDRESS: 3721 SW 47th AVE STE 307	
CITY-ST-ZIP: FT LAUDERDALE FL		3.4 CITY-ST-ZIP: FT. LAUDERDALE, FL 33314	
TITLE: AS	<input type="checkbox"/> DELETE	4.1 TITLE: AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: PERKINS, ROSEMARIE		4.2 NAME: PERKINS, ROSEMARIE	
STREET ADDRESS: 3901 SW 47 AVE, STE 408		4.3 STREET ADDRESS: 3721 SW 47th AVE STE 307	
CITY-ST-ZIP: FT LAUDERDALE FL		4.4 CITY-ST-ZIP: FT. LAUDERDALE, FL 33314	
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-ST-ZIP:		6.4 CITY-ST-ZIP:	

14. I do 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.

SIGNATURE: *[Signature]* DATE: 4/29/97 DAYTIME PHONE #: 954-581-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)