## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## **DOCUMENT# 577566**

Title:

Name:

Address:

City-St-Zip:

FILED Jul 25, 2006 Secretary of State

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Entity Na	me: NSPEC,	INC					
,							
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:			
3908 COC	OANUT TERF	RACE					
	ON, FL 3421						
Current M	lailing Addre	ss:	New Maili	New Mailing Address:			
2020 000							
	OANUT TERF ON, FL 3421						
DIO (DEI 1)	014, 12 0421						
FEI Number	: 59-1847178	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired	d()	
		.,		, ,		,	
Name and	Address of (	Current Registered Agent:	Name and	l Address o	f New Registered Agent:		
DINSKY, N	NANCY M						
	OANUT TERF	₹.					
BRADENT	ON, FL 3421	0 US					
The above	named entity	submits this statement for the	purpose of changing i	its reaistere	d office or registered agent.	or both.	
	e of Florida. ´			J	3 ,	,	
SIGNATUI	DE:						
SICINATO		nic Signature of Registered A	aont		 Date		
	Electro	nic Signature of Registered A	geni		Date		
offices.	O AND DIDEC	TODO:	ADDITION	IO (OLLANO)			
OFFICER	S AND DIREC	TORS:	ADDITION	15/CHANGI	ES TO OFFICERS AND DIF	(ECTORS:	
Title:	PS (	) Delete	Title:		( ) Change ( ) Addition		
Name:	DINSKY, NANC	CY M	Name:				
Address:	3908 COCOAN	IUT TERR.	Address:				
City-St-Zip:	BRADENTON,	FL 34210	City-St-Zip:				
Title:	VP (	) Delete	Title:	VP	(X) Change ( ) Addition		
Name:	DINSKY, DAVI		Name:	DINSKY, NO			
Address:	5408 N.E. 2ND		Address:		ANUT TERR,		
City-St-Zip:		RDALE, FL 33334	City-St-Zip:		N, FL 34210		
Title:	Т (	) Delete	Title:		( ) Change ( ) Addition		
Name:	KUBOND, LIZA		Name:		( ) Shange ( ) Addition		
Address:	804 20TH AVE		Address:				
City-St-Zip:	BRADENTON.		City-St-Zip:				

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

OFF

DINSKY, DAVID I

5408 NE 2ND AVE

FT LAUDERDALE, FL 33304

( ) Change (X) Addition

SIGNATURE: NANCY M DINSKY PRES 07/25/2006

() Delete