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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000001786 (9)

SPECTRUM INTERNATIONAL ASSOCIATES, INC.

Principal Place of Business Mailing Address

## **FILED** May 06 1998 8:00am Secretary of State



PO BOX 128 REDDICK FL 32886		PO BOX 128 REDDICK FL 32686							
						DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified	PACE		
						04/07/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	A	pplied For	
21		<del>-</del> 1	26			86-0542420	- <del></del>	ot Applicable	
Suite, Apt.	#, e1c.	Suite, Apt. #, etc.	-44				\$8.75	Additional	
22		27				5. Certificate of Status Desired	Fee Re	equired	
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00		
23	Country	28	Zip Country			17001107100011110011011	Added		
Zip	<u></u>	<del></del>	30	zi iti y		8. This corporation owes or has paid the curr Personal Property Tax due June 30.		No	
24	25 9. Name and Address of Curr	29 29 Agent				10, Name and Address of New Registered Agent			
					Name				
JACKSON, PHILIP W 17237 NW 87TH AVE. RD.						(DO D. W. W			
REDDICK FL 32686				82	Street A	ddress (P.O. Box Number is Not Acceptable)			
				83					
				84	City		<b>85</b> Zip	Code	
		· · · · · · · · · · · · · · · · · · ·		Ш	•	<u>FL</u>			
11. Pursuant t	<b>to the</b> provisions of Sections 607.0 <b>egistere</b> d agent, or both, in the Sta	502 and 607.1508, Florida Statul ite of Florida. Such change was	tes, the a authorize	bove d by	e-named c the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the apport	changing il sintment as	registered registered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE		Alon	II Desistan	4.600	nt sinuatura re	equired when reinstating) DATE			
12.	Signature, typed or printed hand of registered  OFFICERS 4	AND DIRECTORS	13.	u Age	ni signature re	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12	
TITLE	PTDC	DELETE	1.1.1	TLE		7.551110110701.01101.01.01.01.01.01.01.01.01.01.01.0	Change	Addition	
NAME	JACKSON, PHILIP W	<del></del>	1.2 N	AME				į	
STREET ADDRESS	ARABA ARIA ARIA ARIA ARIA		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	REDDICK FL 32686			1.4 CITY - ST - ZIP					
TITLE	VD	DELETE					☐ Change	Addition	
NAME	4444		2.2 N	2.2 NAME		Contraction			
STREET ADDRESS	45 4135574 41 711			TREET	address				
CITY-ST-ZIP	THE TALL OF ASSET			CITY-S	ST-ZIP				
TITLE	S DELETE 31			TLE			☐ Change	Addition	
NAME			32 N	AME					
STREET ADDRESS	** - * - * * * * * * * * * * * * * * *		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP				CITY-S	ST-ZIP				
TITLE		DELETE	4.1 T	ITLE	1		Change	☐ Addition	
NAME			4.2	NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			_	4.4 CITY- ST-7IP			Change	Addition	
TITLE	_			IŦĿĒ			Change	Addition	
NAME				5.2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY-S	I - ZIP	Change		Addition	
TITLE		F" DECEIE	6.17				— ⊘ilan <b>y</b> c	, 100mon	
NAME			6.2 N		ADDRESS				
STREET ADDRESS					ADDRESS	•			
CITY-ST-ZIP	and for that the information supplier	with this tiling doos got qualify t		IIY-S		t in Section 119 07(3)(i) Florida Statutes, I further ce	rtify that the	nformation	

Thereby centry that the information supplied with this fining does not qualify for the exemption stated in section 119.07(3)), Florida Statutes. Further centry that the information indicated on this annual report for 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.