## 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 # F9700002086 (3)

SPECTRUM RESEARCH GROUP INC.

Principal Place of Business

Mailing Address

4370 S. TAMIAMI TRAIL #103 SARASOTA FL 34231 4370 S. TAMIAMI TRAIL #103 SARASOTA FL 34231

## FILED Apr 15 1998 8:00am Secretary of State



								DO NOT WRITE IN THIS	SPACE		
								3. Date Incorporated or Qualified			
								04/21/1997			
2. Principal Pl				2a. Mailing Address				4. FEI Number	A	Applied For	
		AT IMAIME			BULL	3P1 TR	BIC	65-0733939	N	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.								5. Certificate of Status Desired	,	Additional	
22 SUITE 322 27 SUITE					de			G. Communication of Change Debitors	Fee R	equired	
City & State  City & State  City & State  City & State						، سر		6. Election Campaign Financing	\$5.00	May Be	
	TOZA.			RBS871		7-C		Trust Fund Contribution	Added	to Fees	
ー Zip	<b>~</b> .	Country	Zip		Cou	ntry		8. This corporation owes or has paid the cu		_ ~	
29 3 4 2 3 1 3											
9. Name and Address of Current Registered Agent 81 Name and Address of Current Registered Agent 81 Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
KUBINSUN, JURIN							81 Name				
4370 <b>S.</b> TAMIAMI TRAIL <del>#103</del> → 322						82 Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 34231							63				
										İ	
						84 City 85 Zip Code					
						Ony		FL	.   65   Zip	0000	
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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature, typed	or printed name of registered a	gerit and title II applicat	tile. (NOT	E: Registered	l Agent signature	e required	when reinstating) DATE			
12.		OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	CP			DELETE	1.1 10	LE	I		Change	Addition	
NAME	ROBINS	on, John			1.2 NA	ME				i	
STREET ADDRESS 4370 S. TAMIAMI TRAIL #103 322-					1.3 ST	reet address					
CITY-ST-ZIP		TA FL 34231	•		1.4 CIT	TY-ST-ZIP					
TITLE				DELETE	2.1 TIT	LE			Change	☐ Addition	
NAME					2.2 NA	ME					
STREET ADDRESS					2.3 ST	REET ADDRESS					
CITY-ST-ZIP						TY-ST-ZIP					
TITLE				DELETE	3.1 TIT	~	$\vdash$		Change	Addition	
NAME					3.2 NA	ME			-		
STREET ADDRESS					1	REET ADDRESS					
CITY-ST-ZIP						TY+ST+ZIP					
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NAME					4. 2 NA						
						reet address					
STREET ADDRESS											
CITY-ST-ZIP				DELETE	_	Y-ST-ZIP	$\vdash$		Change	Addition	
TITLE				L VELETE	5.1 TIT				☐ Criwings	TT MODRIOII	
NAME					5.2 NA		1				
STREET ADDRESS					5.3 ST	REET ADDRESS					
CITY-ST-ZIP				Dr		Y-ST-ZIP			TT 6:	1.00	
TITLE				L DELETE	6.1 TIT	LE			L Change	Addition	
NAME					6.2 NA	ME					
STREET ADDRESS					6.3 ST	reet address					
CITY-ST-ZIP						Y-ST-ZIP					
								ection 119.07(3)(i), Florida Statutes. I further ce			
indicated on this annual report or suppliemental 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 ecceiver of 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 the paragraph of the address.											