2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 24, 2000 8:00 am Secretary of State DOCUMENT # **G29808** 1. Entity Name SPEAR DEVELOPMENT CORP. 04-24-2000 90022 026 ***150.00 Principal Place of Business : Mailing Address 3721 SW 47TH AVE 3721 SW 47TH AVE SUITE 307 SUITE 307 FT LAUDERDALE FL 33314-2826 FT LAUDERDALE FL 33314 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2284446 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPEAR, DAVID A Street Address (P.O. Box Number is Not Acceptable) 3721 SW 47 AVE SUITE 307 FT LAUDERDALE FL 33314 Zip Code 8. 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible, 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE ☐ Change ☐ Addition ☐ Delete TITLE SPEAR, L. WILLIAM MARKE NAME STREET ADDRESS 3721 SW 47TH AVE., SUITE 307 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL **VSD** ☐ Addition ☐ Change ☐ Delete TITLE TITLE SPEAR, JEFFREY NAME 3721 SW 47TH AVE., SUITE 307 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE SPEAR, DAVID A. NAME NAME 3721 SW 47TH AVE., SUITE 307 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE PERKINS, ROSEMARIE NAME NAME 3721 SW 47TH AVE., SUITE 307 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. I 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 report or supplemental 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. SPEAN

4-15-00

954-581.9000

Daytime Phone #