2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # L06445 Jan 10, 2008 08:00 AM 1. Entity Name **Secretary of State** SPICOLA INTERNATIONAL, INC. Principal Place of Business Mailing Address PO BOX 5976 601 N 19TH ST US TAMPA, FL 33675 STE 2 **TAMPA, FL 33605** US No Chg-P CR2E034 (11/05) 01062008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2967458 Not Applicable \$8.75 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHARLES G. SPICOLA JR DO NOT WRITE 601 N 19TH ST TAMPA, FL 33605 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Charles G. Spic. LA 2008 SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS CPD TITLE NAME SPICOLA, CHARLES JR. **601 N. 19TH STREET** STREET ADDRESS CITY-ST-ZIP TAMPA, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Charles G.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP