


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

FILED
Mar 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L21293 (0)

1. Corporation Name
SPOOR ELECTRIC, INC.



Principal Place of Business % DAVID W. SCHMIDT 100 N.E. FIFTH AVENUE DELRAY BEACH FL 33483	Mailing Address % DAVID W. SCHMIDT 100 N.E. FIFTH AVENUE DELRAY BEACH FL 33483
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 165 Cleary Road Suite, Apt. #, etc. 22 B-1 City & State 23 West Palm Beach, FL. Zip 24 33413	2a. Mailing Address 26 165 Cleary Road Suite, Apt. #, etc. 27 B-1 City & State 28 West Palm Beach, FL. Zip 29 33413	Country 25 USA 30 USA
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3. Date Incorporated or Qualified 10/09/1989	4. FEI Number 65-0153732	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

SCHMIDT, DAVID W.
100 N.E. FIFTH AVENUE
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name LOUIS J. CARBONE, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable) 701 SE 6th Avenue
83 Suite Suite 201
84 City Delray Beach, FL
85 Zip Code 33483

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 familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **1/8/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SPOOR, MARK		1.2 NAME	
STREET ADDRESS 165 CLEARY ROAD, #B1		1.3 STREET ADDRESS	
CITY-ST-ZIP WEST PALM BEACH FL 33413		1.4 CITY-ST-ZIP 33413	
TITLE TD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SPOOR, GLENN		2.2 NAME	
STREET ADDRESS 165 CLEARY ROAD, #B1		2.3 STREET ADDRESS	
CITY-ST-ZIP WEST PALM BEACH FL		2.4 CITY-ST-ZIP 33413	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME Secretary	
STREET ADDRESS		3.3 STREET ADDRESS Lynn Spoor	
CITY-ST-ZIP		3.4 CITY-ST-ZIP 165 Cleary Road #B-1, WPB, FL. 33413	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or 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.

SIGNATURE: *[Signature]* DATE: **1/8/98**

CR2E034 (10/97)