## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M06592

City-St-Zip:

ROCKVILLE, MD 20850

F.,4:4 . N. ODECOMB INC FILED Mar 17, 2008 Secretary of State

Entity Nan	ne: SPEC	OMP, INC.						
Current Principal Place of Business:				New Princ	New Principal Place of Business:			
901 NW 17	TH STREE	ĒΤ						
SUITE F								
MIAMI, FL	33136 L	JS						
Current Mailing Address:				New Mailir	New Mailing Address:			
1051 NW 1	4 ST							
#130 MIAMI, FL	33136 L	JS						
FEI Number:	59-2482101	FEI Number Ap	plied For()  FEI	Number Not Appli	cable ( )	Certificate of Status De	esired ( )	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
FRANKEL, 1051 NW 1 SUITE 130 MIAMI, FL	4 ST							
The above in the State		ity submits this stat	tement for the purpos	se of changing it	s registered	d office or registered age	ent, or both,	
SIGNATUR	RE:							
	Elect	tronic Signature of	Registered Agent			Date		
Election Can	naign Finan	cing Trust Fund Cont	ribution ( )					
Licotion Gan	ipaigii i iliaii	ong maser and com	indution ( ).					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	PRES	( ) Delete		Title:		() Change () Addition		
Name:	FRANKEL, I			Name:				
Address:	2100 NE 21			Address:				
City-St-Zip:	MIAMI, FL	33179		City-St-Zip:				
Title:	SEC	( ) Delete		Title:		() Change () Addition		
Name:	FRANKEL,	STUART		Name:				
Address:	2100 NE 21	1 TERRR		Address:				
City-St-Zip:	MIAMI, FL	33179		City-St-Zip:				
Title:	VP	( ) Delete		Title:	VP	(X) Change ( ) Addition		
Name:	FRIEDMAN,	, ŠÁMANTHA		Name:	FRIEDMAN,	• • •		
Address:	721 FALLS	GROVE DR. #2132		Address:	110 SUMME	R WALK DR.		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

GAITHERSBURG, MD 20878

SIGNATURE: HARA FRANKEL **PRES** 03/17/2008