

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M26740

FILED
Sep 02, 2005
Secretary of State

Entity Name: SPEAR SAFER PA CPAS & ADVISORS

Current Principal Place of Business:

8350 N.W. 52 TERR., #301
MIAMI, FL 33166

New Principal Place of Business:

8350 N.W. 52 TERR., #200
MIAMI, FL 33166

Current Mailing Address:

8350 N.W. 52 TERR., #301
MIAMI, FL 33166

New Mailing Address:

8350 N.W. 52 TERR., #200
MIAMI, FL 33166

FEI Number: 59-2627716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEAR, M. GLENN
8350 NW 52ND TERR
STE 301
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

SPEAR, M. GLENN
8350 NW 52ND TERR
STE 200
MIAMI, FL 33166 US

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.

SIGNATURE:

09/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D/V () Delete
Name: SCHROEDER, PETER E.
Address: 8350 N.W. 52 TERR., #301
City-St-Zip: MIAMI, FL 33166

Title: D/S () Delete
Name: INGALLS, BARBARA
Address: 8350 N.W. 52 TERR #301
City-St-Zip: MIAMI, FL 33166

Title: C/P () Delete
Name: SPEAR, M. GLENN,
Address: 8350 N.W. 52 TERR., #301
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/V (X) Change () Addition
Name: SCHROEDER, PETER E.
Address: 8350 N.W. 52 TERR., #200
City-St-Zip: MIAMI, FL 33166

Title: D/S (X) Change () Addition
Name: INGALLS, BARBARA
Address: 8350 N.W. 52 TERR #200
City-St-Zip: MIAMI, FL 33166

Title: D/P (X) Change () Addition
Name: SPEAR, M. GLENN
Address: 8350 N.W. 52 TERR., #200
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: M. GLENN SPEAR

PRES

09/02/2005

Electronic Signature of Signing Officer or Director

Date