

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # M81107

1. Entity Name
SPECTRUM SCREEN PRINTING, INC.



Principal Place of Business
**945 N.E. INDUSTRIAL BLUE
JENSEN BEACH, FL 34957**

Mailing Address
**952 SE CANDLE AVE
PORT SAINT LUCIE, FL 34983 US**



01202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0048766

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**JESSEE, TERRY L
952 SE CANDLE AVENUE
PORT ST. LUCIE, FL**

**DO NOT WRITE
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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	JESSEE, TERRY
STREET ADDRESS	952 S.E. CANDLE AVE.
CITY-ST-ZIP	PORT ST. LUCIE, FL 34983
TITLE	V
NAME	JESSEE, MARY ANN
STREET ADDRESS	952 S.E. CANDLE AVE.
CITY-ST-ZIP	PORT ST. LUCIE, FL 34983
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/31/06-80003-006 150.00

**DO NOT WRITE
IN THIS SPACE**

**PLEASE SIGN,
DATE & MAIL**

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: TERRY JESSEE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/06
Date

772-863-1180
Daytime Phone