

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90011 049 ***150.00

DOCUMENT # P00000117423

1. Entity Name
SPECTRUM INTERNATIONAL GROUP, INC.



Principal Place of Business

9075 SEMINOLE BLVD.
SEMINOLE, FL 33772

Mailing Address

9075 SEMINOLE BLVD.
SEMINOLE, FL 33772

54010352



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Post Office 7606

Suite, Apt. #, etc.

01202004

Chg-P

CR2E034 (10/03)

City & State

City & State
Seminole, Florida

4. FEI Number

59-3690377

Applied For

Not Applicable

Zip

Country

Zip

33775

Country

Pinellas

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CATON, RICHARD P.
9075 SEMINOLE BLVD.
SEMINOLE, FL 33772

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

2/19/04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
HAYWARD, CHRISTOPHER R
STREET ADDRESS 4302 HENDERSON BOULEVARD #200
CITY-ST-ZIP TAMPA, FL 33629

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME PRESIDENT, DIRECTOR, TREASURER
CHRISTOPHER HAYWARD
STREET ADDRESS POST OFFICE BOX 7606
CITY-ST-ZIP SEMINOLE, FLORIDA 33775

TITLE ☒ Change ☒ Addition
NAME VICE PRESIDENT, DIRECTOR, SECRETARY
MARTINA HAYWARD
STREET ADDRESS POST OFFICE BOX 7606
CITY-ST-ZIP SEMINOLE, FLORIDA 33775

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.2.2004

44 7861.555 995

Date

Daytime Phone #