2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110613

2049 NW 126 AVE

PEMBROKE PINES, FL 33028

Address: City-St-Zip:

Entity Name: SPECTRUM COST MANAGEMENT, INC.

FILED Mar 25, 2005 Secretary of State

Littly Nai	HE. SPECTROW COST WANAGEWENT, II	vC.		
Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
2049 NW 1 PEMBROK	126 AVE KE PINES, FL 33028	5001 S. UNIVERSITY DRIVE SUITE E DAVIE, FL 33328		
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
2049 NW 1 PEMBROK	126 AVE KE PINES, FL 33028	5001 S. UNIVERSITY DRIVE SUITE E DAVIE, FL 33328		
FEI Number:	20-0293628 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of State	us Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered	Name and Address of New Registered Agent:	
CESAROTTI, JOSEPH JR 2049 NW 126 AVE PEMBROKE PINES, FL 33028 US		BERZOK, ERIC A 5001 S. UNIVERSITY DRIVE SUITE E DAVIE, FL 33328 US	5001 S. ÚNIVERSITY DRIVE SUITE E	
	named entity submits this statement for the of Florida.	purpose of changing its registered office or registered	d agent, or both,	
SIGNATUR	RE: ERIC A. BERZOK	03/25/200	5	
	Electronic Signature of Registered Ag	gent Date		
Election Car	npaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete CESAROTTI, JOSEPH JR 2049 NW 126 AVE PEMBROKE PINES, FL 33028	Title: () Change () Addition Name: Address: City-St-Zip:	1	
Title: Name: Address: City-St-Zip:	D () Delete BERZOK, ERIC A 2770 NE 15TH STREET #102 FORT LAUDERDALE, FL 33304	Title: () Change () Addition Name: Address: City-St-Zip:	1	
Title: Name:	D () Delete CESAROTTI, MARIANNE	Title: () Change () Addition	١	

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.

Address:

City-St-Zip:

SIGNATURE: ERIC A. BERZOK D 03/25/2005