2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000116488

Entity Name: SPATIQUE, INC.

FILED Aug 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9858 CLINT MOORE RD. 9858 CLINT MOORE RD.

C-17 C-117

BOCA RATON, FL 33496 BOCA RATON, FL 33496

Current Mailing Address: New Mailing Address:

9858 CLINT MOORE RD. 9858 CLINT MOORE RD. C-17 C-117
BOCA RATON, FL 33496 BOCA RATON, FL 33496

FEI Number: 20-0458475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HICKMAN, JANET PIETRUNTI, TRACEY A PD 9858 CLINT MOORE RD. 9858 CLINT MOORE RD. C-17 C-17

C-17
BOCA RATON, FL 33496 US
BOCA RATON, FL 33496 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: TRACEY PIETRUNTI 08/13/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: ARONERTY, SCOTT Name: PIETRUNTI, TRACEY
Address: 9858 CLINT MOORE RD., C-17 Address: 9858 CLINT MOORE RD. SUITE C-117

City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: HICKEN, JANET Name: SCOTT, ARONESTY

Address: 9858 CLINT MOORE RD., C-17 Address: 9858 CLINT MOORE RD. SUITE C-117

City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

Title: TRD (X) Delete Title: () Change () Addition

 Name:
 PIETRUNTI, TRACEY
 Name:

 Address:
 9858 CLINT MOORE RD., C-17
 Address:

 City-St-Zip:
 BOCA RATON, FL 33496
 City-St-Zip:

Title: SD (X) Delete Title: () Change () Addition

 Name:
 DUBIN, MADDY
 Name:

 Address:
 9858 CLINT MOORE RD., C-17
 Address:

 City-St-Zip:
 BOCA RATON, FL 33496
 City-St-Zip:

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: TRACEY PIETRUNTI PD 08/13/2005