

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000160137

Entity Name: SPEC PRESENTS, INC.

**FILED**  
**Aug 11, 2006**  
**Secretary of State****Current Principal Place of Business:**1739 HUNTINGTON LANE  
SUITE 119  
ROCKLEDGE, FL 32955 US**New Principal Place of Business:****Current Mailing Address:**1739 HUNTINGTON LANE  
SUITE 119  
ROCKLEDGE, FL 32955 US**New Mailing Address:**

FEI Number: 20-1929891

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**COPPOLA, JOSEPH  
1145 STARLING WAY  
VIERA, FL 32955 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: P ( ) Delete  
Name: BRYAN, WILLIAM W  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: VP,S ( ) Delete  
Name: COPPOLA, JOSEPH  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: T ( ) Delete  
Name: COPPOLA, JOSEPH  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: D ( ) Delete  
Name: COPPOLA, PEGGY  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: COPPOLA, MARGARET M  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: VP (X) Change ( ) Addition  
Name: COPPOLA, EDMUND J  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: T (X) Change ( ) Addition  
Name: COPPOLA, EDMUND J  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 USTitle: S (X) Change ( ) Addition  
Name: COPPOLA, MARGARET M  
Address: 1145 STARLING WAY  
City-St-Zip: VIERA, FL 32955 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: EDMUND J COPPOLA

VP

08/11/2006

Electronic Signature of Signing Officer or Director

Date