

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000053999

Entity Name: SPY CITY INC.

FILED
Mar 31, 2007
Secretary of State

Current Principal Place of Business:

6067 HOLLYWOOD BLVD
SUITE #300
HOLLYWOOD, FL 33024

New Principal Place of Business:

4007 WEST WOODSCAPE DRIVE
UNIT 1-K
MIRAMAR, FL 33023

Current Mailing Address:

6067 HOLLYWOOD BLVD
SUITE #300
HOLLYWOOD, FL 33024

New Mailing Address:

4007 WEST WOODSCAPE DRIVE
UNIT K-1
MIRAMAR, FL 33023

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUISSAINT, MOISE
530 SW 198 TR
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

LOUISSAINT, MOISE
4007 WEST WOODCAPE DRIVE
UNIT K-1
MIRAMAR, FL 33023 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:

03/31/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR (X) Delete
Name: RODRIGUEZ, BENJAMIN
Address: 6067 HOLLYWOOD BLVD SUITE #350
City-St-Zip: HOLLYWOOD, FL 33024

Title: DIR (X) Delete
Name: GENOIS, JEAN S
Address: 2905 PIERCE ST APT 9
City-St-Zip: HOLLYWOOD, FL 33020

Title: DIR () Delete
Name: LOUISSAINT, MOISE
Address: 530 SW 198 TR
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MOISE LOUISSAINT

DIR

03/31/2007

Electronic Signature of Signing Officer or Director

Date