2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000003131

Entity Name: SPECTRUM CONSTRUCTION SERVICES, INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4302 HENDERSON BLVD. 238 EAST DAVIS BLVD

SUITE 200 SUITE 309

TAMPA, FL 33629 US TAMPA, FL 33606 US

Current Mailing Address: New Mailing Address:

4302 HENDERSON BLVD. 238 EAST DAVIS BLVD SUITE 200 SUITE 309

TAMPA, FL 33629 US TAMPA, FL 33606 US

FEI Number: 65-0401780 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN, SCOTT
4302 HENDERSON BLVD.
SUITE 200
TAMPA, FL 33629

BROWN, SCOTT
238 EAST DAVIS BLVD.
SUITE 309
TAMPA, FL 33606 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: SCOTT BROWN 04/27/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BROWN, SCOTT
 Name:
 BROWN, SCOTT

 Address:
 4302 HENDERSON BLVD STE 200
 Address:
 238 EAST DAVIS STE 309

Address: 4302 HENDERSON BLVD STE 200 Address: 238 EAST DAVIS STE 30
City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33606

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

Name: BROWN, STACI Name: BROWN, STACI

 Address:
 4302 HENDERSON BLVD STE 200
 Address:
 238 EAST DAVIS STE 309

 City-St-Zip:
 TAMPA, FL 33629
 City-St-Zip:
 TAMPA, FL 33606

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

 Name:
 HAYWARD, CHRIS
 Name:

 Address:
 4302 HENDERSON BLVD STE 200
 Address:

 City-St-Zip:
 TAMPA, FL 33629
 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: SCOTT BROWN PC 04/27/2004