

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P930000 87538**
1. Corporation Name **SPECTRA ENTERPRISES, INC**
10601-A3 HWY 441
LEESBURG, FL 34788

Principal Place of Business **SAME** Mailing Address **SAME**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/23/93	3a. Date of Last Report 6/6/96
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-3214777	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HARLOW MIDDLETON, ESQ
699 5TH AVENUE
MT. DORA, FLORIDA 32757

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DPT DEPANICIS, GRIMM B.	1.2 NAME	100002278501
STREET ADDRESS	529 E 7TH AVE	1.3 STREET ADDRESS	-08/27/97--01067--011
CITY-ST-ZIP	MT. DORA, FL 32757	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V.S. DEPANICIS, TAMARA M.	2.2 NAME	
STREET ADDRESS	529 E 7TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MT. DORA, FL 32757	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **GRIMM B. DEPANICIS** 7/31/97 352-728-2000

CR2E034 (9/96)

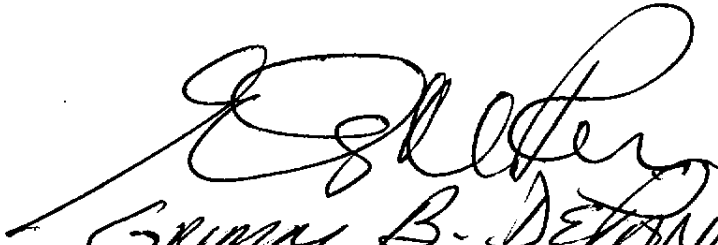
②

8/12/97

TO WHOM THIS MAY CONCERN.

PLEASE BE ADVISED THAT I
DID NOT RECEIVE MY ORIGINAL
APPLICATION FOR CORP. RENEWAL.
AS PER MY CONVERSATION WITH
YOUR OFFICE I AM ENCLOSEDING
165.00 AND A NEW APPLICATION.

THANK YOU


GRIMMER B. DETANIKAS, Pres
SPECTRA ENTERPRISES, INC.