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FILED

May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000064548 (8)

1. Corporation Name

SPEAR CHELSEA CORP.

Principal Place of Business

3901 SW 47TH AVE SUITE 408
FT LAUDERDALE FL 33314

Mailing Address

3901 SW 47TH AVE SUITE 408
FT LAUDERDALE FL 33314-2815



3. Date Incorporated or Qualified
09/01/1994

3a. Date of Last Report
04/15/1996

2. Principal Place of Business

21 3721 S. W. 47th AVE.

22 SUITE 307
FT. LAUDERDALE, FL 33314

23 City & State
24 Zip
25 Country

2a. Mailing 3721 S. W. 47th AVE.
SUITE 307

26 FT. LAUDERDALE, FL 33314

27 City & State

28 Zip
29 Country

4. FEI Number
65-0517138

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SPEAR, DAVID A.
3901 SW 47TH AVENUE
SUITE 408
FT. LAUDERDALE FL 33314

10. Name and Address of New Registered Agent

81 Name SPEAR, DAVID A.
82 Street Address (P.O. Box Number is Not Acceptable)
3721 SW 47th AVENUE
83 STE 307
84 City FT LAUDERDALE FL 85 Zip Code 33314

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	SPEAR, L. WILLIAM	
STREET ADDRESS	3901 SW 47TH AVE., STE. 408	
CITY - ST - ZIP	FT. LAUDERDALE FL	
TITLE	DVT	<input type="checkbox"/> DELETE
NAME	SPEAR, DAVID A.	
STREET ADDRESS	3901 SW 47TH AVE., STE. 408	
CITY - ST - ZIP	FT. LAUDERDALE FL	
TITLE	DVS	<input type="checkbox"/> DELETE
NAME	SPEAR, JEFFREY N.	
STREET ADDRESS	3901 SW 47TH AVE., STE. 408	
CITY - ST - ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SPEAR, L. WILLIAM	
1.3 STREET ADDRESS	3721 SW 47th AVE STE 307	
1.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33314	
2.1 TITLE	DVT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SPEAR, DAVID A.	
2.3 STREET ADDRESS	3721 SW 47th AVE STE 307	
2.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33314	
3.1 TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SPEAR, JEFFREY N.	
3.3 STREET ADDRESS	3721 SW 47th AVE STE 307	
3.4 CITY - ST - ZIP	FT. LAUDERDALE, FL 33314	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0273204

CR2E034 (9/96)