

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000066321

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: SPOTMASTER OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

18000 BISCAYNE BLVD  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

18000 BISCAYNE BLVD  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

2100 NE 123RD ST  
NORTH MIAMI, FL 33181

FEI Number: 65-0712214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANENZ, RAUL M  
8180 NW 36TH STREET  
SUITE 100  
MIAMI, FL 33166 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: TAYLOR, KATHLEEN C  
Address: 5600 COLLINS AVE. APT. 16 N.  
City-St-Zip: MIAMI BEACH, FL 33166

Title: P ( ) Delete  
Name: MECKLER, GWEN  
Address: 4061 N. 41ST STREET  
City-St-Zip: HOLLYWOOD, FL 330211813

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: TAYLOR, KATHLEEN C  
Address: 5600 COLLINS AVE  
City-St-Zip: MIAMI BEACH, FL 33166

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

I hereby certify that the information supplied with this filing does not qualify 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: KATHLEEN TAYLOR

D

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date