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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90232 036 ***150.00

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1. Corporation Name

SPENSE-CAM INDUSTRIES, INC.

Principal Plac	e of Business	Mailing Address					i inchina ii	B (Bill Billi Raifi B	ETIL BOILL FORIU		1010) OISI 1001
208 CRESTENT LAKELAND FL	LAKE COURT	208 CRESCENT LAKE RD LAKELAND FL 33813								. _	
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		· 				3.	 Date Incorpora 09/06/1994 				
2. Principal P	lace of Business	2a. Mailing Addre	ss			4.	. FEI Number			Ap	plied For
21		26					59-326634	<u> </u>		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, 6	etc.			5.	Certificate of S	tatus Desired	. 🗆	\$8.75 A Fee Re	
City & Stat	e	City & State	· · · · · · · · · · · · · · · · · · ·			6.	Election Camp	aign Financing		\$5.00	May Be
23		28					Trust Fund Co	ntribution		Added t	
Zip	Country	Zip	c	ountry		8.	This corporation	n owes the cur	rent year Into		_ {
24	25	29	30				Personal Prop				□No
	9. Name and Address of Curr	rent Registered Agent					Name and Ad	dress of New	Registered	Agent	
CDA	VICE PEDDY D. I			81	Name						
208	VES, KERRY D. J CRESCENT LAKE COURT			82	Street	Address (F	P.O. Box Numbe	er is Not Accept	table)		
LAK	ELAND FL 33813			83	·	-					
				84	City	· .		,		85 Zip C	ode.
						1			FL	. []	·]
11 Dureugnt	to the provisions of Sections 607.0	1502 and 607.1508, Florida	a Statutes, the	ahove		l corporatio	in submits this si	latement for the	purpose of	changing its	registered [
office or r agent. I a	egistered agent, or both, in the Sta im familiar with, and accept the obli	ite of Florida. Such changi	e was authoriz	ed by	the corp	oration's b	oard of directors	. I hereby acce	pt the appoi	ntment as rec	gistered }
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14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-99

(941) CUB-22299

R2F034 (11/98)