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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000022941 (5)

SPECO INTERNATIONAL, INC.

## FILED Apr 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address			C DEDITOR SHE IDEA BUILD ADVIS DE HE DE HE STORE FINA		MIND BERIE EIRIG FRIST GERÜF INDE ANGE
3405 NW 9TH AVE 3405 NW 9TH AVENUE 1205 1206					
I		FT LAUDERDALE FL 3330	9	DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified 03/20/1995	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0567853	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be  ☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29	30	Personal Property Tax due June 30	— — ·
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Regis	tered Agent
	Tari, Martin		81 Name	Sotari. Wartin	
	4 TRAVELERS TREE DRIVE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
ВО	CA RATON FL 33433			84 travelers 11	ee Drive
			83		
			84 <del>- Çity</del> _	(T) = 4 = 1	85 Zip Code
44 5		01.00 007.4500.51 <b>0</b>		a rozan	FL 38488
office or re	egistered agent, or both, in the S	tate of Florida. Such change was a	uthorized by the corpora	poration submits this statement for the pure ation's board of directors. I hereby accept t	bose of changing its registered he appointment as registered
agent. I a	m familiar with, and accept the of	bligations of, Section 607.0505, Flo	orida Statutes.		•
SIGNATURE	Signature, typed or printed name of registered	d soud at at the it made able (MOIE	Registered Agent signature requ	ired when reinstating	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	·
TITLE	PSD	DELETE	1.1 TiTLE		Change Addition
NAME	KATARI, MARTIN		1.2 NAME		
STREET ADDRESS	7784 TRAVELERS TREE D	RIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		7-1
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		C cuando C Nostron
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		,
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
indicated.	on this annual report or suppleme	antal annual coront is true and accu-	undo and that my cianate	i Section 119.07(3)(i), Florida Statutes. I fur ure shall have the same legal effect as if ma	ado undos oaths that Lors an
officer or o	director of the corporation or the	receiver or trustee empowered to e	execute this report as rec	uired by Chapter 607, Florida Statutes; and	that my name appears in
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