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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P95000048312 (9)

DOCUMENT # SPEARHEAD CORPORATION (Formerly)

All-Aboard PORT & BROKER SERVICES, INC.

521 N. 26 AVENUE HOLLYWOOD FL 33020

Mailing Address

321 N. 26 AVENUE HOLLYWOOD FL 33020

FILED 98 HAY 11 PM 3: 20

SECRETARY OF STATE



บร	•	US 1		DO NOT WRITE IN	THIS SPACE
				 Date Incorporated or Qualified 06/21/1995 	
2. Principal Pl	ace of Business	2a. Mailing Address	- '\	4. FEI Number	Applied For
21 /2/6	SE 1st Street	26 POB 304	14	65-059 1929	Not Applicable
Suite, Apt 1	#, etc. 7 COTTAGE	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	ANDGRDALE	City & State	ERDIZE	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 p 2 2	Country	8. This corporation owes or has paid the	ne current year Intangible
24 5 3 3	3301 25 USA		o USA	Personal Property Tax due June 30.	Yes 💢 No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regist	ered Agent
IANNARELLI, WM J JR					
521 N. 26 AVE			82 Street /	Address (P.O. Boy Number is Not Acceptable)	
HOLLYWOOD FL 33020			121	6 SE 1St St	
			83		
			84 City	TLANDERDALE	FL 85 Zip Code 33301
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the purp	ose of changing its registered
agent lar	m familiar will have accept the obligat	pns of Section 607.0505, Flori	da Statutes.	oration's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	Signature typical or injented (under of real femiliary)	b frendent Souther if applicable (NOTE)	Registered Agent signature	'1	25 98
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PC	☐ DELETE	1.1 TITLE		Change Addition
NAME	IANNARELLI, WM. J JR		1.2 NAME		
STREET ADDRESS	521 N. 26 AVENUE		13 STHEFT ADDRESS	126 SE 15+ S+	
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CITY - S1 - ZIP	FR FL 33301	
TITLE		☐ DELETE	21 TITLE	•	Change Addition
NAME			22 NAME		
STREET ADDRESS			23 STREET ADDRESS	90000252	24495
CITY-ST-ZIP		Diete	2 4 CITY-ST-ZIP	90000252 	01110009
TETLE		DELETE	3 1 TITLE	****150.0)) ***********************************
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP		Change Addition
TITLE NAME		TT DEFEIG	4.1 TITLE 4. 2 NAME		CT CHRONIAC CT MIGNIBUL
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		El perit	5.2 NAME		C Granife C Valuation
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
1					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		Orango Autocom
			1		1 1 1998
STREET ADDRESS			6.3 STREET ADDRESS	TAM LEEF "	סללו ו ו

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 Statules. 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 chapter 607, or on an attachment with an address 2-04011