

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000097087	
1. Entity Name SPY TECH INTERNATIONAL, INC.	



Principal Place of Business 255 E. FLAGLER ST. SUITE 84 AND 85 MIAMI, FL 33131 US	Mailing Address 255 E. FLAGLER ST. SUITE 84 AND 85 MIAMI, FL 33131 US
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FILED

04 MAY -5 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04302004 No Chg-P CR2E034 (10/03)

4. FCI Number NOT APPLICABLE	Assessed For Not Assessed
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NEVAS, MARCOS RICARDO 2005 SAN SOUCI BLVD APT 202 NORTH MIAMI, FL 33181	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, handwritten and typed name of registered agent and the fees paid. (FCI) Registered agent's signature required for filing. Date.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☒ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	D NEVAS, M. RICARDO 2005 SAN SOUCI BLVD., APT #202 NORTH MIAMI BEACH, FL 33181
TITLE NAME STREET ADDRESS CITY ST ZIP	D GARCIA, ENRIQUE 12035 SW 19TH TERR., UNIT 47 MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

500036274655
05/13/04--01074--008 **163.75

These name need to be
remove from corporation
Thank you.
FID# 352182465

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or subsequent 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 10 or Block 11 if changed, or on an attachment with an address, with a, other like empowered.

SIGNATURE: *M. Nevias*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR