

FILED
Feb 05, 2005 08:00 AM
Secretary of State

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000103697		
1. Entity Name SPY TECH, INC.		
Principal Place of Business 2900 W. SAMPLE ROAD #4305 POMPANO BEACH, FL 33073 US		Mailing Address 2900 W. SAMPLE ROAD #4305 POMPANO BEACH, FL 33073 US
DO NOT WRITE IN THIS SPACE		
		01052005 No Chg-P CR2E034 (10/03)
4. FEI Number 65-0739336		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BIRO, JOHN 2900 W. SAMPLE ROAD #4305 POMPANO BEACH, FL 33073		DO NOT WRITE IN THIS SPACE
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-electing)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE	P	
NAME	BIRO, JOHN	
STREET ADDRESS	2900 W. SAMPLE RD #4305	
CITY-ST-ZIP	POMPANO BEACH, FL 33073	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. 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 report or supplemental 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 all other like empowered.		
SIGNATURE: 		2-3-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Day/mo/Phone #

000000215402
02/05/05-800 25-013 150.00