

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90395 008 ***150.00

DOCUMENT # P98000009256

1. Entity Name

SPY LINK INTERNATIONAL, INC.

Principal Place of Business

**4356 N. FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308**

Mailing Address

**4356 N. FEDERAL HIGHWAY
FORT LAUDERDALE FL 33308**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0807425

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENMAN, LARRY C C.P.A.

**9927 ROBIN'S NEST RD.
BOCA RATON FL 33496**

Name

MARK HITCHELL

Street Address (P.O. Box Number is Not Acceptable)

4356 N. FEDERAL HWY.

City

FT. LAUDERDALE

FL

Zip Code

33308

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.

SIGNATURE *Mark Hitchell*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **HITCHELL, MARK**
CITY-ST-ZIP **480 E. MCNAB RD., APT. 15
POMPAHO BEACH FL 33060**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **HITCHELL, ANN**
CITY-ST-ZIP **480 E. MCNAB RD. APT. 15
POMPAHO BEACH FL 33060**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **PRESIDENT**
STREET ADDRESS **MARK HITCHELL**
CITY-ST-ZIP **4356 N. FEDERAL HWY.
FT. LAUDERDALE, FL 33308**

TITLE ☒ Change ☐ Addition
NAME **VP**
STREET ADDRESS **ANN HITCHELL**
CITY-ST-ZIP **4356 N. FEDERAL HWY.
FT. LAUDERDALE, FL 33308**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Mark Hitchell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 4/10/02 (954) 202-7814

Date

Daytime Phone #

CR2E034 (9/01)