

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90088 010 \*\*\*150.00

DOCUMENT # P98000037039

1. Corporation Name  
SPEAR EGRET CORP.

Principal Place of Business

701 BRICKELL AVE  
STE 1900  
MIAMI FL 33131

Mailing Address

701 BRICKELL AVE  
STE 1900  
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/23/1998

4. FEI Number

65-0831919

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. # 3721 S. W. 47th AVE.  
22 SUITE 307  
23 City & State FT. LAUDERDALE, FL 33314  
24 Zip Country

2a. Mailing Address

26 Suite, Apt. # etc. 3721 S. W. 47th AVE.  
27 SUITE 307  
28 City & State FT. LAUDERDALE, FL 33314  
29 Zip Country

9. Name and Address of Current Registered Agent

SMITH, HARRY B  
701 BRICKELL AVE  
STE 1900  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name SPEAR, DAVID A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 3721 S. W. 47th AVE.  
SUITE 307  
84 City FT. LAUDERDALE, FL 33314 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

David A. Spear, Vice President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP SPEAR, L. WILLIAM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	3721 S. W. 47th Avenue	
1.3 STREET ADDRESS	SUITE 307	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314	
2.1 TITLE	DVT SPEAR, DAVID A.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	3721 S. W. 47th AVE.	
2.3 STREET ADDRESS	SUITE 307	
2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314	
3.1 TITLE	DVS SPEAR, JEFFREY N.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	3721 S. W. 47th AVE.	
3.3 STREET ADDRESS	SUITE 307	
3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33314	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 Statutes. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David A. Spear, V.P.

Date

Daytime Phone #

4-14-99 954-581-9000