2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 24, 2000 8:00 am Secretary of State DOCUMENT # P99000047897 1. Entity Name SPEAR CORAL CORP. 04-24-2000 90022 027 ***150.00 Mailing Address Principal Place of Business 3721 SW 47TH AVENUE SUITE 307 3721 SW 47TH AVENUE SUITE 307 FORT LAUDERDALE FL 33314-2826 FORT LAUDERDALE FL 33314 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number Not Applicable 65-0929770 Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Spear, David A. SMITH, HARRY B Street Address (P.O. Box Number is Not Acceptable) 3721 S.W. 47 Avenue 701 BRICKELL AVENUE SUITE 1900 **MIAMI FL 33131** Suite 307 City Zip Code Lauderdale 33314 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. x4/15/00David A. Spear Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE ☐ Delete TITLE Spear L. William 3721 S. W. 47th AVE. NAME NAME STREET ADDRESS STREET ADDRESS SUITE 307 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FI 33314 ☐ Change ☐ Addition ☐ Defete TITLE Spear Jeffrey N. 3721 S. W. 47th AVE. NAME STREET ADDRESS STREET ADDRESS **SUITE 307** CITY-ST-ZIP CITY-ST-ZIP RIVILAUDERDALE, FL 33314 Change ■ Addition ☐ Delete TITLE TITLE Spear, David A. NAME NAME 3721 S. W. 47th AVE. STREET ADDRESS STREET ADDRESS SUITE 307 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE, FL 33314 Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP [] Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE STREET ADDRESS STHEET ANDRESS ST-71P CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 showered 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. MATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER