2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2005 8:00 am
Secretary of State
04-04-2005 90046 007 ***150.00

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02162005 Chg-P CR2E034 (10/03)

DOCUMENT # S92550

1. Entity Name
SPECTRUM BUSINESS SYSTEMS, INC.

Principal Place of Business	Mailing Address
10194 N.W. 47 STREET SUNRISE, FL 33351 US	10194 N.W. 47 STREET SUNRISE, FL 33351 US

2. Principal Place of Business	3. Mailing Address
7200 W. Commercial Blvd.	7200 W Commercial Blvd
Suite, Apt. #, etc.: 203	Suite, Apt. #, etc.: 203
City & State: Lauderhill, FL	City & State: Lauderhill, FL
Zip: 33319 Country: USA	Zip: 33319 Country: USA

4. FEI Number: 65-0297686 ☐ Applied For ☐ Not Applicable

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
MOSS, SHERRY 10194 N.W. 47 STREET SUNRISE, FL 33351	Name: Sherry Moss Street Address (P.O. Box Number is Not Acceptable): 7200 W Commercial Blvd #203 City: Lauderhill FL Zip Code: 33319

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: S. Moss
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MOSS, MICHAEL 10008 NW 16 ST CORAL SPRINGS, FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR MOSS, MICHAEL 10008 NW 16 ST CORAL SPRINGS, FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MOSS, SHERRY 10008 NW 16 ST CORAL SPRINGS, FL 33071	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: S. Moss 5-2-05 954-742-5235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #