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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # V48721

SPECTRUM CREDIT CORPORATION

FILED									
Apr 21 1997	8:00am								
Secretary o	f State								

Principal Place of Business Mailing Address 6555 NW 9TH AVE 6555 NW 9TH AVE SUITE 312 FT LADUERDALE FL 33309 US Mailing Address 6555 NW 9TH AVE SUITE 312 FT LAUDERDALE FL 33309-2067 US				67							
							Date Incorporated or Qualified 07/08/1992	3a. Date of 04/26/	Last Report 1 996		
2. 21	Principal Place of Busi	2a. Mailing Addre	ailing Address			4. (4. FE! Number Applied For 65-0351217 Not Applied be				
22	Suite, Apt. #, etc.		Suite, Apt. #, (Suite, Apt. #, etc.				Certificate of Status Desired	□ \$	8.75 Additional Fee Required	
23	City & State	City & State				1	Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees		
24	Zip	Country 25	Ζιρ 29	—ı ' ├~¬ '			I	8. This corporation has liability for intangible tax under s 199 032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent							10.	10. Name and Address of New Registered Agent			
BUTTIMER, PETER 10 S.E. 13TH STREET				81	Name				···		
POMPANO BEACH FL 33060			82	Street	Address (P.	ss (P.O. Box Number is Not Acceptable)					
				83		.,					
					84	City	· , <u> </u>		FL 65	<u></u>	
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 Signature, typod or printed hance of registered agent and title if approachie (NOTE: Registered Agent signature required when reinstating) DATE											
12. OFFICERS AND DIRECTORS 13.				13.		A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITL	ŧ D		DEL	ETE	1.1 TITLE					Change Addition	

SOLTAU, LAURISTON NAME 1.2 NAME 7710 N.W. 62ND WAY STREET ADDRESS 1.3 STREET ADDRESS PARKLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ D£LETE Change Addition TITLE 2.1 TITLE **BUTTIMER, PETER** NAME 2.2 NAME 10 SE 13TH ST. STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 THLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREFT ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I do 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 eath; 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 of Block.13 if changed, or on an attachment with an address.

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