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2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000119563

1. Entity Name
SPK MANAGEMENT, INC.

Principal Place of Business	Mailing Address
4617 BYERLE CIRCLE TAMPA, FL 33634	4617 BYERLE CIRCLE TAMPA, FL 33634

05-05-04 90219-019 $150.00

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2338307

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KNIGHT, SHERYEL P
4617 BYERLE CIRCLE
TAMPA, FL 33634

DO NOT WRITE IN THIS SPACE

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 _____ DATE
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
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KNIGHT, SHERYEL P
STREET ADDRESS	4617 BYERLE CIRCLE
CITY-ST-ZIP	TAMPA, FL 33634
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Sheryel Knight 4/27/04 813-363-8665
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 8/3/04 — Daytime Phone #

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SPK MANAGEMENT, INC.

P.O. Box 24511 Tampa, Florida 33623

August 3, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee Florida 32314

Enclosed is my corrected (signed) 2004 Annual Report. In my telephone conversation today with Gary at (850) 245-6056, he advised me of a correspondence that was sent to me May 19, 2004, stating that my original Report was not signed. My check #2028, dated April 27, 2004 in the amount of $150.00 (copy enclosed) had already cleared the bank as if everything was okay.

If this does not complete my Corporation Renewal, please contact me at the above address or by phone at (813) 363-8665.

Thank you,

Sheryel P. Knight
President

SPK/p

Enclosure