

FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT# P12000086310

Entity Name: SPARTAN 12 INC

**Secretary of State
CC6089820035**

Current Principal Place of Business:

2101 W MAIN STREET
LEESBURG, FL 34748

Current Mailing Address:

PO BOX 2259
BELLEVIEW, FL 34421

FEI Number: 46-1202699

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OBEROI, MANIKARAN S
1216 HORSEMINT LANE
WESLEY CHAPEL, FL 33543 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name OBEROI, MANIKARAN S
Address PO BOX 2259
City-State-Zip: BELLEVIEW FL 34421

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: _____

Electronic Signature of Signing Officer/Director Detail

_____ Date