

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90036 017 ***150.00

DOCUMENT # 280590

1. Entity Name
SPARGO ENTERPRISES, INC.

Principal Place of Business

13237 HEATHER MOSS DR
 #1019
 ORLANDO FL 32837
 US

Mailing Address

13237 HEATHER MOSS DR
 #1019
 ORLANDO FL 32837
 US

2. Principal Place of Business

13310 PALOMA DR
 Suite, Apt. #, etc.

3. Mailing Address

13310 PALOMA DR
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
 ORLANDO FL

Zip
 32837

Country
 USA

City & State
 ORLANDO FL

Zip
 32837

Country
 USA

4. FEI Number
 59-1039187

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SPARGO, CHARLES H
 13237 HEATHER MOSS DR
 #1019
 ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name SPARGO, CHARLES H.
Street Address (P.O. Box Number is Not Acceptable) 13310 PALOMA DR
City ORLANDO **FL** **Zip Code** 32837

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.

SIGNATURE Charles H. Spargo, President 3-15-02
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME SPARGO, DAVID C.
STREET ADDRESS 13237 HEATHER MOSS DR #1019
CITY-ST-ZIP ORLANDO FL 32837

TITLE TS ☐ Delete
NAME SPARGO, DIANE J
STREET ADDRESS 13237 HEATHER MOSS DR #1019
CITY-ST-ZIP ORLANDO FL 32837

TITLE D ☐ Delete
NAME SPARGO, CHARLES H
STREET ADDRESS 13237 HEATHER MOSS DR #1019
CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE J. SPARGO, 5/TREAS 3-15-02 407-240-2210
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)