2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001604

Entity Name: SPART INC. AND SUBSIDIARY

FILED Apr 26, 2006 Secretary of State

Current Pri	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
SUITE 120	IMERCENTRE EST, CA 92639		SUITE 120	25531 COMMERCENTRE DRIVE SUITE 120 LAKE FOREST, CA 92630		
Current Mailing Address:				New Mailing Address:		
25531 COMMERCENTRE DRIVE SUITE 120 LAKE FOREST, CA 92639			SUITE 120	25531 COMMERCENTRE DRIVE SUITE 120 LAKE FOREST, CA 92630		
FEI Number:	63-0775889	FEI Number Applied For () FEI N	umber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
13501 INGENÚITY DRIVE, SUITE 132				VALLE, TONY 13501 INGENUITY DRIVE, SUITE 132 ORLANDO, FL 32826 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: TONY VALLE				04/26/2006		
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WINTON, WAYNE	DE LA CARLOTA, SUITE 325	Title: Name: Address: City-St-Zip:	WINTON, WAYN	CENTE DR., #120	
Title: Name: Address: City-St-Zip:	SEPUCHA, ROBE	YER DRIVE, SUITE 1100	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	D () E CASE, CARL 4901 CORPORA HUNTSVILLE, AL		Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address: City-St-Zip:	MCCARTER, R. S	O CENTER DRIVE, SUITE 200F	Title: Name: Address: City-St-Zip:	MCCARTER, R. S	PRINGS PKWY #220	
Title: Name: Address: City-St-Zip:	SEPUCHA, ROBE	YER DRIVE, SUITE 1100	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	FABIAN, JERRY	Delete DE LA CARLOTA, SUITE 325 CA 926531545	Title: Name: Address: City-St-Zip:	FABIAN, JERRY	Change () Addition CENTRE DR. #120 CA 92630	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JERRY FABIAN S 04/26/2006