

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J36086

Entity Name: SHARP CONCEPTS, INC.

FILED
Apr 13, 2005
Secretary of State

Current Principal Place of Business:

1624 HIWAY 67
JONESVILLE, NC 28642

New Principal Place of Business:

272 BLUEGRASS DR.
HENDERSONVILLE, TN 37075

Current Mailing Address:

272 BLUEGRASS DR.
HENDERSONVILLE, TN 37075

New Mailing Address:

FEI Number: 59-2700802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARP, JOYCE
2511 E COLONIAL BLVD
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHARP, JOYCE
Address: 272 BLUEGRASS DR.
City-St-Zip: HENDERSONVILLE, TN 37075

Title: D () Delete
Name: SHARP, GARY
Address: 272 BLUEGRASS DR.
City-St-Zip: HENDERSONVILLE, TN 37075

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOYCE SHARP

PD

04/13/2005

Electronic Signature of Signing Officer or Director

Date