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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # K22471 (2)		
1. Corporation Name SPARKLE PURE, INC.		

Principal Place of Business 3705 U.S. HWY 98 SOUTH LAKELAND FL 33813-4269	Mailing Address 3705 U.S. HWY 98 SOUTH LAKELAND FL 33813-4269
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/18/1988	3a. Date of Last Report 01/25/1994
21		26		4. FEI Number 65-0042332	☐ Applied For ☐ Not Applicable
22		27		5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.092, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CHACHULA, KATHERINE W 3705 US HWY 98 SO. LAKELAND FL 33813				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature of person or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-registering) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	CHACHULA, KATHERINE W	1.2 NAME	
STREET ADDRESS	3705 US HWY 98 S	1.3 STREET ADDRESS	
CITY - ST - ZIP	LAKELAND FL	1.4 CITY - ST - ZIP	
TITLE	DS	2.1 TITLE	☐ Change ☐ Addition
NAME	WOODSMALL, BARRETT M.	2.2 NAME	
STREET ADDRESS	3705 US HWY 98 S	2.3 STREET ADDRESS	
CITY - ST - ZIP	LAKELAND FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:  **4-14-1995 913-665-5144**
Barrett M. Woodsmall - SECRETARY