FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

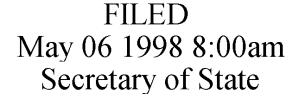
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K24780

(4)

SPARKLING BLUE, INC.

rincipal	Place	of Business





Principal Place	e of Business	Mailing Address					
5375 W. 20Th	H AVE.	5820 NW 114TH	5820 NW 114TH ST.				
HIALEAH FL 33012		HIALEAH FL 330	HIALEAH FL 33012				
1						DO NOT WRITE IN THIS SI	PACE
ł						3. Date Incorporated or Qualified	
A D 1 - 1 - 1 D		1 - 14.05				05/26/1988	1 1
	ace of Business	2a. Mailing Addr	ess			4. FEI Number	Applied For
21	<u> </u>	26				65-0227118	Not Applicable
Sulte, Apt.	#, U (C.	Suite, Apt. #,	eic.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City 9 Ctoto				<u> </u>	Fee Required
_	Ð	City & State				6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28				Trust Fund Contribution	Added to Fees
Zip	Country	Zip	<u> </u>	Country		8. This corporation owes or has paid the curre	
24	25 9. Name and Address of C	[29]	30			Personal Property Tax due June 30.	Yes No
		Content negistered Agent		81	Name	10. Haille Blid Address of New Registered A	Reur
	UZA, MIGUEL		ļ	"	Manie	•	ı
	20 NW 114TH ST.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	- · · · · · · · · · · · · · · · · · · ·
HIA	NLEAH FL 33012		ļ				
				83			
				84	City		85 Zip Code
					J.,	FL	2.5 3333
11, Pursuant	to the provisions of Sections 60	07.0502 and 607.1508. Floric	la Statutes, the al	ove	-named corp	poration submits this statement for the purpose of clion's board of directors. I hereby accept the appoint	changing its registered
agent. I a	egistered agent, or both, in the magnetic manner of the miliar with, and accept the	: state of ritingal such chart e obligations of, Section 607.	ge was authorized 0505, Florida Stat	utes	rthe corporat S.	lion's doard of directors. Thereby accept the appoint	niment as registered
SIGNATURE		-					
	Signature, typed or printed name of register	rted agent and tilled applicable	(NOTE: Registered	1 Age	nt signature requir	ired when reinstating) DATE	
12.	OFFICE	RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P	☐ DE	LETE 1.1 TO	ΓLĒ			Change Addition
NAME	BOUZA, MIGUEL A.		1.2 NA	ME			
STREET ADDRESS	5820 NW 114 ST		1.3 ST	REET	ADDRESS	•	
CITY-ST-ZIP	HIALEAH FL 33012		1.4 CI	TY-S	T-ZIP		
TITLE		□ DE	LETE 2.1 TII	LE			Change Addition
NAME		0	2.2 NA	ME			
STREET ADDRESS			23 ST	REET	ADDRESS		
CITY-ST-ZIP			2.40	ITY-S	ST-71P		
TITLE		DE		_			Change Addition
NAME			3.2 NA		}	_	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE		DE	3.4. CI LETE 4.1 3(1		11-28		Change Addition
		[] UL				ľ	T Aueuße □ Votation
NAME			4. 2 N		1000000		
STREET ADDRESS			4.3 ST	REET	ADDRESS [
CITY-ST-ZIP			4.4 C)1		T- ZIP		
TITLE		DE				L	Change Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET	address		i
CITY-ST-ZIP			5 4 C	TY-S	T-ZIP		
TITLE		☐ DE	LETE 6.1 TIT	ILE	Ţ		Change Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET	ADDRESS		
CITY-ST-ZIP			6.4.00	TY - S1	T-7IP		

14. 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 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 if changed or on an attachment with an address.