

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K77333

(8)

1. Corporation Name

SPARKLE CARPET CLEANING INC.



Principal Place of Business

Mailing Address

% DAVID CORMIA  
14930 WHATLEY ROAD  
DELRAY BEACH FL 33445

% DAVID CORMIA  
14930 WHATLEY ROAD  
DELRAY BEACH FL 33445

3. Date Incorporated or Qualified  
03/24/1989

3a. Date of Last Report  
01/31/1995

2. Principal Place of Business

2a. Mailing Address

21 628 Jaeger Drive  
Suite, Apt. #, etc.

26 628 Jaeger Drive  
Suite, Apt. #, etc.

4. FEI Number  
59-2684561

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

City & State

City & State

23 Delray Beach, Florida

28 Delray Beach, Florida

Zip

Country

Zip

Country

24 33444

25 U.S.A.

29 33444

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of the Registered Agent

CORMIA, DAVID  
14930 WHATLEY ROAD  
DELRAY BEACH FL 33445

81 Name

David Cormia

82 Street Address (P.O. Box Number is Not Acceptable)

628 Jaeger Drive

83

DE

84 City

Delray Beach

FL

85 Zip Code

33444

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

David Cormia P.D.

01/14/96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
CORMIA, DAVID  
STREET ADDRESS 14930 WHATLEY RD.  
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☒ DELETE

NAME D  
LIRETTE, MAURICE  
STREET ADDRESS 7801 PIPER LANE  
CITY-ST-ZIP LAKE WORTH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

NAME D  
Tracey Walker Cormia  
STREET ADDRESS 628 Jaeger Drive  
CITY-ST-ZIP Delray Beach, FL 33444

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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, if changed, or on an attachment with an address.

SIGNATURE:

David Cormia

David Cormia

(407)276-8983

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)