

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 27, 2003 8:00 am
Secretary of State

08-27-2003 90080 043 ***150.00

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DOCUMENT # **P01000062297**

1. Entity Name
SHARP COMMUNICATIONS AND CONTROLS, CORP.



Principal Place of Business
**1600 WINCHESTER ROAD NORTH
ST. PETERSBURG FL 33710**

Mailing Address
**1600 WINCHESTER ROAD NORTH
ST. PETERSBURG FL 33710**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3751610**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SHARP, SABRINA A~~
**1600 WINCHESTER ROAD NORTH
ST, PETERSBURG FL 33710**

Name **Michael C. Sharp**

Street Address (P.O. Box Number is Not Acceptable)
1600 WINCHESTER RD N

City **St. Petersburg** FL Zip Code **33710**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Michael C. Sharp* **Michael C. Sharp President**

DATE **8/22/03**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	SHARP, MICHAEL C	
STREET ADDRESS	1600 WINCHESTER ROAD NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	SHARP, SABRINA A	
STREET ADDRESS	1600 WINCHESTER ROAD NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33710	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael C. Sharp* **Michael C. Sharp Pres.** 8/22/03 941-915-8292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

**Sharp Communications
and Controls Corp.**

1600 Winchester Rd N
St. Petersburg, FL 33710

80141408
#P01000062297

August 24, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Please accept my request to waive the late fee for our Uniform Business Report. We never received our original notice. I have enclosed the filing fee of \$150.00 with the report we received in late July. If you have any questions please contact me at 941-915-8292

Sincerely,



Michael C. Sharp
President