

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90173 006 ***150.00

DOCUMENT# P02000000547

1. Entity
SPARKLING COLORS PAINTING, INC.



Principal Place of
5550 NW 61ST STREET, APT. #503
COCONUT CREEK FL 33073

Mailing
5550 NW 61ST STREET, APT. #503
COCONUT CREEK FL 33073

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

USA

Zip

Country

USA

☐ **CHECK HERE IF MAKING CHANGES**

4. FEI Number

01-0550323

Applied For

Not Applicable

5. Certificate of Status

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered

DE ALCANTARA, MARCONE THOME
5550 NW 61ST STREET, APT. #503
COCONUT CREEK FL 33073

7. Name and Address of Now Registered

Name

Street Address (P O Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Department of State

9. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 may Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> Delete
NAME	DE ALCANTARA, MARCONE THOME	
STREET ADDRESS	5550 NW 61ST STREET, APT. #503	
CITY - ST - ZIP	COCONUT CREEK FL 33073	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	DE ALCANTARA, MARCONE THOME	
STREET ADDRESS	5550 NW 61ST STREET, APT. #503	
CITY - ST - ZIP	COCONUT CREEK FL 33073	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 (3)(l), 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 qualified by chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/05/03 (954) 304-3482

Date

Daytime Phone #

Attachment 80117301
PO2000000547

Coconut Creek, FL - May 05th, 2003

FLORIDA DEPARTMENT OF STATE
REINSTATEMENT DEPARTMENT
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE - FL - 32314

To Whom It May Concern:

I would like to inform you that I have a Profit Corporation
by the following name:

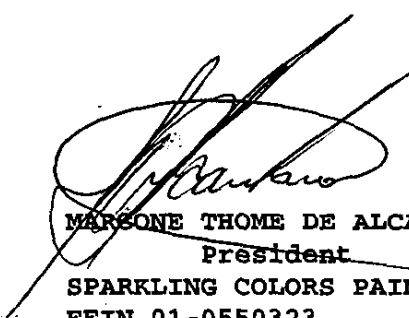
SPARKLING COLORS PAINTING, INC.
Doc. # P02000000547

Our corporation has its articles filed with Florida
department of State-Division of Corporation on 01/02/2002.
Unfortunately, we never received the first notice, of our 2001
UBR form; and we did not know that we must pay it annually. This
is the first time we are renewing our corporation.

As this happened against our will, we would like to ask you
please wave the Reinstatement Fee, as I am sending you the amount
of US\$ 150.00, plus the completed Form. I would like to ask you
to please consider this, and file these as soon as possible.

If there is any other necessary information concerning this
matter, please feel free to contact me. Thank you.

Sincerely,



MARCENE THOME DE ALCANTARA
President

SPARKLING COLORS PAINTING, INC.
FEIN 01-0550323
5550 NW 61ST STREET, APT. #503
COCONUT CREEK FL 33073