-2608 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2008 08:00 AN Secretary of State

ANNUAL REPORT				• •	TUD	21, 200	ο υσ.γ
DOCUMENT # P04000035092 1. Entity Name SPARTY ENTERPRISES, INC.					S	Secretar	y of Sta
SPARIT	ENTERPRISES, INC.	• *					
Principal Plac	e of Business	Mailing Address		1			,
324 RIVIERA FORT LAUDE	AISLE DR. Erdale, Fl. 33301	324 RIVIERA ISLE DR. FORT LAUDERDALE, FL 3330	1				
	O NOT WRITE	IN THIS SPA	CE	02182008	No Chg-P	CR2E034 (11/	·
	ar fine to a Phat that the	7741, 2546 3441	可可叫做	4. FEI Numbe			Applied For Not Applicable
			MARK		of Status Desired	□ \$8.75 Fee Req	Additional
6. Name and Address of Current Registered Agent					建型汽车设置	7473 1711	
6363 TAF	N, ERNEST T ST., #205 DOD, FL 33024				NOT W		
	e named entity submits this statement for the titions of registered agent.	ne purpose of changing its register	ed office or register	ed agent, or bot	h, in the State of Flo	rida. I am familiar v	with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable (NOTE: Registere	ed Agent signature required	when reinstating)		DATE	
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS	. 其字本本字其"	[m. ". "]	Transfer to the	CENTRAL SECTION OF STREET	** 5 % D P * 12
TITLE	P				Michiel 18		
NAME STREET ADDRESS CITY-ST-ZIP	PACK, KARLENE 324 RIVIERA ISLE DR. FORT LAUDERDALE, FL 33301						
TITLE					. 	保予をはずります。 1 2 41 7 22 ~~	
NAME					รักรัสที่กับกระ	ไล้ก็กัววิจังกัวส์	150: 00:
STREET ADDRESS CITY-ST-ZIP							
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NAME STREET ADDRESS						Adjenta.	
CITY-ST-ZIP					4. 建水煤		
TITLE				Visitali	Tend by		可数据引
NAME				胡薯蓣			[[[]]]
STREET ADDRESS CITY-ST-ZIP							
TITLE		. — :		restate			
NAME				re Jan 5			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: MULLING HOLD HOLD SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS CITY-ST-ZIP

2-23-08 954:328:070