FILE NOW: FILING F PROFIT CORPORATION ANNUAL REPORT 1998		FLC	FTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		OF STATE	FILED Apr 08 1998 8:00am Secretary of State			
SPARTY Principal Place 1885 SW 4TH E-1	Y INDUSTRIES INC. e of Business	E-1	dress TH AVE., E-7						
DELRAY EBAC	UM FL 33444	US	DELRAY BEACH FL 33444 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Pl	lace of Business	2a. Mailing	Address	v		07/05/1994 4. FEI Number			pplied For
ī	<u></u>	26				65-0510805			lot Applicable
Suite, Apt.	#, etc.	Suito, Aj	pi#,eic.			5. Certificate of Status Desired			Additional lequired
City & State			City & State			6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip		Col	intry	B. This corporation owes or ha	s paid the ci	rrent year Ir	tangible
<u> </u>	25 9. Name and Address of Cu	29 urrent Registered Ag	ent	30		Personal Property Tax due J 10. Name and Address of New			_ No
					83				
11. Pursuant f office or n agent. La	to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the c	7.0502 and 607.1508, State of Florida Such obligations of, Section	Florida Statu change was 607.0505, F	tes, the al authorize lorida Stal	84 City	poration submits this statement for t ation's board of directors. I hereby a	FI he purpose ccept the ap	<b>_</b> [ ] ]	Code its registered s registered
SIGNATURE	to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the c Stgnature, typed or printed name of registeri	·			84 City		Fi he purpose ccept the ap DATE	<b>_</b> [ ] ]	
SIGNATURE	Signature, typed or printed name of registern OFFICERS	ed agent and title if applicable S AND DIRECTORS	(NO	TE Registere	84 City bove-named cor d by the corpora sutes.		DATE	D DIRECTO	its registered s registered RS IN 12
SIGNATURE 2. ITLE AMRE TREET ADDRESS	Signature, typed of printed name of register OFFICERS DP MCINNES, ROBERT B-17 BAMBOO DR.	ed appliand title diapplicable SAND DIRECTORS		TE Registere 13. 1.1 Ti 1.2 Ni 1.3 ST	84 City cove-named cor d by the corpora utes. d Agent signature requ TLE AME IREET ADDRESS	ired when reinstating)	DATE	of changing pointment as	its registered s registered
IGNATURE 2. TLE AME	Signature, typed of printed name of register OFFICERS DP MCINNES, ROBERT B-17 BAMBOO DR. BRINY BREEZES FL 3343 DVP MARCOVITCH, ALLEN J 1155 S.W. 25TH AVE.	ed apont and title d applicable S AND DIRECTORS [ 5	(NO	TE Registere <b>13.</b> 1.1 Ti 1.2 Ni 1.3 Si <u>1.4 Ci</u> 2.1 Ti 2.2 Ni	City     City     cove-named cor     d by the corpora     utes.     d Agent signature requ      TLE     AME     IREET ADDRESS     TY-ST-ZIP     TLE	ired when reinstating)	DATE	D DIRECTO	its registered s registered RS IN 12
IGNATURE 2. TLE MME IREET ADORESS TY-ST-ZIP TLE MME ILE MME MME	Signature, typed of printed name of register OFFICERS DP MCINNES, ROBERT B-17 BAMBOO DR. BRINY BREEZES FL 3343 DVP MARCOVITCH, ALLEN J 1155 S.W. 25TH AVE. BOYNTON BEACH FL 334 DVP KIPPERT, JOAN Z	ed apont and title d applicable S AND DIRECTORS [5 [5 [428	(NO	TE Registere 13. 11 TI 12 N 1.3 ST 1.4 Cl 2.1 TT 2.2 N 2.3 ST 2.4 C 3.1 TT 3.2 N	City     City     Dove-named cor     d by the corpora     utes.     Agent signature requ     TLE     AME     TREET ADDRESS     TY-ST-ZIP     TLE     MME     IREET ADORESS     ITY-ST-ZIP     TLE     MME	ired when reinstaling) ADDITIONS/CHANGES TO O	DATE	Changing     pointment as     DIRECTO     Change	its registered s registered RS IN 12 Addition
IGNATURE 2. TLE WHE IREET ADORESS TY-ST-ZIP TLE WHE IREET ADORESS TY-ST-ZIP TLE IREET ADORESS TY-ST-ZIP TLE	Signature, typed of printed name of register OFFICERS DP MCINNES, ROBERT B-17 BAMBOO DR. BRINY BREEZES FL 3343 DVP MARCOVITCH, ALLEN J 1155 S.W. 25TH AVE. BOYNTON BEACH FL 334 DVP	ed apont and title d applicable S AND DIRECTORS [5 15 428 [3]	DELETE	TE Registore 13. 11 Ti 12 N 1.3 ST 1.4 Cl 2.1 Ti 2.2 N 2.3 ST 2.4 C 3.1 Ti 3.2 N/ 3.3 ST	City     City     Doove-named cor     d by the corpora     utes.     Addent signature requ     TLE     AME     IRLET ADDRESS     TY-ST-ZIP     TLE     MME     IRLET ADDRESS     ITY-ST-ZIP     TLE     MME     IRLET     ADRESS     ITY-ST-ZIP     TLE     MME     IRLET     ADRESS     ITY-ST-ZIP     TLE     MME     IN     ST-ZIP     TLE     MME     IN     ST-ZIP     IN     IN     ST-ZIP     IN     IN     ST-ZIP     IN     ST-Z	ired when reinstaling) ADDITIONS/CHANGES TO O	DATE	Change	Its registered
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