PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400052489 (9)

SPARCO DEVELOPMENT CORP.

Principal Place of Business Mailing Address 100 S.E. 2ND ST. 100 S.E. 2ND ST. 28 FLOOR 28 FLOOR MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 07/11/1994 08/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0518905 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State etion Campaign Financing \$5.00 May Be 23 28 Fund Contribution Added to Fees Zip Country Zip Country corporation owes or has paid the current year total gible Yes 24 ersonal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KTG&S REGISTERED AGENT CORPORATION **B1** 100 S.E. 2ND ST. 82 Street Address (P.O. Box Number is Not Acceptable) 28 FLOOR **MIAMI FL 33131** 83 84 City 85 Zip Code 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 a gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ☐ Addition DELETE 1,1 TITLE Change TITLE DE CESPEDES, CARLDS NAME 1.2 NAME 7350 N.W. 35 TERR. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33122 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE DE CESPEDES, JORGE L NAME 2.2 NAME 7350 N.W. 35 TERR. STREET ADDRESS 2.3 STREET ADDRESS **MAIMI FL 33122** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TiTL€ 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY- ST- 7IP CITY-ST-ZIP ■ DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change ■ Addition 5.1 TITLE NAME 5.2 NAME

certify that the information supplied with this filing does not duality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the 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 cer or director of the corporation or the receiver or trustic employed to execute this report as required by Chapter 607, Florida Statutes; and that my name Block 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

62 NAME 6.3 STREET ADDRESS 6.4 CHTY-ST-ZIP

DELETE

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

Change

Addition

FILED

Aug 22 1997 8:00am

Secretary of State