


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2004 8:00 am
Secretary of State

08-27-2004 90009 021 ***150.00

DOCUMENT # P94000055777 1. Entity Name SPRINZ INTERNATIONAL, INC.					
Principal Place of Business 3800 S TAMiami TRAIL SUITE 213 SARASOTA, FL 34239			Mailing Address 3800 S TAMiami TRAIL SUITE 213 SARASOTA, FL 34239		
2. Principal Place of Business 5112 FAR OAK CIRCLE Suite, Apt. #, etc.		3. Mailing Address 5112 FAR OAK CIRCLE Suite, Apt. #, etc.			
City & State SARASOTA FLORIDA Zip 34238 Country		City & State SARASOTA FLORIDA Zip 34238 Country		4. FEI Number 59-3257129	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RANCOURT, DAVE 7621 BEE RIDGE RD SARASOTA, FL 34241 <div style="text-align: center; font-size: 1.2em;">941-3784664</div>			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$550.00 - Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPRINZ, GARY 3800 S TAMiami TR, STE 213 5112 FAR OAK CIRCLE SARASOTA, FL 34235 SARASOTA, FL 34238		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPRINZ, MAURICE 2427 TUTTLE TERRACE SARASOTA, FL 34239		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: GARY N. SPRINZ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			8/24/04 Date		
941-914-6581 941-365			Daytime Phone #		

24081930



08232004 Chg-P CR2E034 (10/03)

Attachment
P94000055777
24681936

8/24/2004

Department of State
Division of Corporations

Enclosed \$/50.

Did not receive renewal
notice.

Thank,

G. Sprunz

Please note address change as of 6/1/2004

Sprunz International Inc.
5112 Far Oak Circle
Sarasota FL 34238-3303