

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

lot 2

PROFIT CORPORATION ANNUAL REPORT 1997  
 ORIGINAL DEPARTMENT OF STATE  
 Florida  
 Secretary of State  
 DIVISION OF CORPORATIONS

**P040000581180**

FILED  
 97 JUL 28 AM 8 21  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # **P040000581180**  
 1. Corporation Name  
**Spark-Gold Inc.**

Principal Place of Business Mailing Address  
**17210 N.W. 43 AVE**  
**Miami Fla. 33055**

3. Date Incorporated or Qualified **Dec. 1994** 3a. Date of Last Report **Aug 1996**  
 4. FEI Number **65-0536382** Applied For  Not Applicable   
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**Lewis E. Sparks**  
**17210 N.W. 43 AVE**  
**Miami Fla. 33055**

10. Name and Address of New Registered Agent  
 B1 Name  
 B2 Street Address (P.O. Box Number is Not Acceptable)  
 B3  
 B4 City **FL** B5 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>President</b>	<input type="checkbox"/> DELETE
NAME	<b>Lewis Edward Sparks</b>	
STREET ADDRESS	<b>17210 N.W. 43 AVE</b>	
CITY-ST-ZIP	<b>Miami Fla. 33055</b>	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

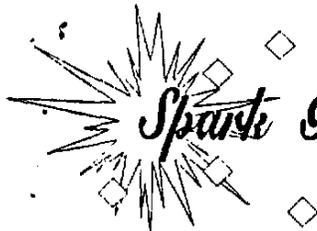
1.1 TITLE	<b>Vice President</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>John Goldsmith</b>	
1.3 STREET ADDRESS	<b>701 N.E. 23 St #305</b>	
1.4 CITY-ST-ZIP	<b>Miami Fla. 33137</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ DATE: **7-14-97** DAYTIME PHONE #: **623-1787**

CR2E034 (9/96)

20f2



# Spark Gold Inc.; Tile Installation Specialist

17210 Northwest 43 Ave. / Miami, Florida 33055  
Lic.# CC-95-BS00102

Lewis Sparks  
Office: 623-1787  
Beeper: 839-4776  
J.W. Goldsmith Jr.  
291-7804

Department Of State  
Division of Corporations  
POB 6327  
Tallahassee Fl 32314

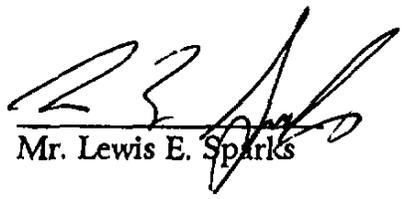
July 10, 1997

Re: Annual Report Filing

On June 30, 1997 I made a request for form 201. Cor Profit A/R to file my annual report which I received July 7, 1997.

I did not receive this form prior to my request. Therefore I am requesting that the late fee of \$550.00 be waived. I have enclosed a check in the amount of \$165.00.

Thanking you in advance for your consideration.

  
Mr. Lewis E. Sparks

File  
copy