

2007 FOR PROFIT CORPORATION ANNUAL REPORT

06-18-2007 90001 035 ***150.00

P96000094491

FILED

SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUN 27 AM 8:57

DOCUMENT # P96000094491

1. Entity Name

D.R. SHARPE ENTERPRISES, INC.



Principal Place of Business

5628 S.W. 103RD AVENUE
COOPER CITY, FL 33328

Mailing Address

5628 S.W. 103RD AVENUE
COOPER CITY, FL 33328

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

5628 SW 103 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cooper City, FL

06082007

Chg-P

CR2E034 (12/06)

4. FEI Number

65-0717081

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHARPE, D.R.
5628 S.W. 103RD AVENUE
COOPER CITY, FL 33328

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

D.R. Sharpe D.R. Sharpe

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

5/3/07

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME SHARPE, D.R.
STREET ADDRESS 5628 S.W. 103RD AVENUE
CITY- ST- ZIP COOPER CITY, FL

TITLE DST ☐ Delete
NAME SHARPE, ELIZABETH M
STREET ADDRESS 5628 SW 103RD AVE
CITY- ST- ZIP COOPER CITY, FL

TITLE VD ☐ Delete
NAME SHARPE, RICHARD R
STREET ADDRESS 2102 COUNTRY BEND RD S
CITY- ST- ZIP LAKELAND, FL 33803

TITLE VD ☐ Delete
NAME SHARPE, THOMAS W
STREET ADDRESS 10385 SW 50 CT
CITY- ST- ZIP COOPER CITY, FL 33328

TITLE VD ☐ Delete
NAME PACETTI, LYNDIA D
STREET ADDRESS 951 SW 95TH TERR
CITY- ST- ZIP PEMBROKE PINES, FL 33025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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:

D.R. Sharpe

Signature, typed or printed name of officer or director

5/3/07

DATE

954 680 1264

Daytime Phone #