


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2007 8:00 am
Secretary of State

05-10-2007 90022 026 ***150.00

DOCUMENT # P97000093643	
1. Entity Name SPARKY ENTERPRISES, INC.	

Principal Place of Business 7481 W OAKLAND PARK BLVD STE 201 LAUDERHILL, FL 33319	Mailing Address 7481 W OAKLAND PARK BLVD STE 201 LAUDERHILL, FL 33319
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

05012007 Chg-P CR2E034 (12/06)

4. FEI Number 65-0786409	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SMYTH, REGINA E 7481 W OAKLAND PARK BLVD STE 201 LAUDERHILL, FL 33319		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

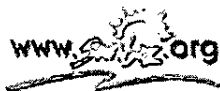
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete SMYTH, REGINA E 7481 W OAKLAND PARK BLVD, STE 201 LAUDERHILL, FL 33319	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
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 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: 	Date 5/17/07	Daytime Phone # _____
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		



ATTACHMENT
40110025
Division of Corporations

Annual Report

Annual Report Help

Document Number

P97000093643

Business Entity Name

SPARKY ENTERPRISES, INC.

FEI Number

650786409

FEI Number Status

☒ Listed Above ☐ Applied For ☐ Not Applicable

Certificate of Status Desired

☐ Yes ☒ No \$8.75 each

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Principal Place of Business

Address

7481 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

STE 201

City, State

LAUDERHILL

FL

Zip Code & Country

33319

Mailing Address

Address

7481 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

STE 201

City, State

LAUDERHILL

FL

Zip Code & Country

33319

Name and Address of Registered Agent

Name (Last, First, Middle, Title)

SMYTH

REGINA

E

- OR -

Business to serve as RA

Address (PO Box is not acceptable)

7481 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

STE 201

City, State

LAUDERHILL

FL

Zip Code & Country

33319

US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

ATTACHMENT

40110025

#P97000093643

entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature Regina E. Smyth

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

Officer/Director Name and Address

Our database can hold up to 6 officers/directors. If more than 6 officers/directors need to be made a part of the record, you cannot file the annual report online. You will need to download an annual report and list the additional officers/directors, title(s), name, and address on an attachment.

Title	<u>D</u>		
Name (Last, First, Middle, Title)	<u>SMYTH</u>	<u>REGINA</u>	<u>E</u>
- OR -			
Entity Name to serve as Officer/Director	<u></u>		
Street Address	<u>7481 W OAKLAND PARK BLVD, STE 201</u>		
City, State	<u>LAUDERHILL</u>	<u>FL</u>	
Zip Code & Country	<u>33319</u>	<u></u>	
Title	<u></u>		
Name (Last, First, Middle, Title)	<u></u>	<u></u>	<u></u>
- OR -			
Entity Name to serve as Officer/Director	<u></u>		
Street Address	<u></u>		
City, State	<u></u>	<u></u>	
Zip Code & Country	<u></u>	<u></u>	
Title	<u></u>		
Name (Last, First, Middle, Title)	<u></u>	<u></u>	<u></u>
- OR -			
Entity Name to serve as Officer/Director	<u></u>		
Street Address	<u></u>		
City, State	<u></u>	<u></u>	
Zip Code & Country	<u></u>	<u></u>	
Title	<u></u>		

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Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as
Officer/Director

Street Address

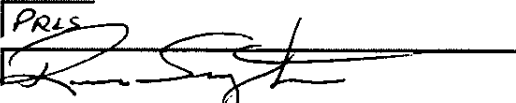
City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

PRIS


This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

Continue

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