

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # S20433

1. Entity Name

MIKE SPRINT TING, INC.



Principal Place of Business

**1241 MILLER AVENUE
WINTER PARK, FL 32789-4875**

Mailing Address

**1241 MILLER AVENUE
WINTER PARK, FL 32789-4875**



02232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3044539** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHUERMANN, MICHAEL
1241 MILLER AVENUE
WINTER PARK, FL 32789**

**DO NOT WRITE
IN THIS SPACE**

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 Mike Schuermann MIKE SCHUERMANN 3-10-06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **ST**
NAME **SCHUERMANN, MICHAEL**
STREET ADDRESS **1241 MILLER AVE.**
CITY-ST-ZIP **WINTER PARK, FL 327894875**

TITLE **P**
NAME **SCHUERMANN, KAREN**
STREET ADDRESS **1241 MILLER AVE.**
CITY-ST-ZIP **WINTER PARK, FL 327894875**

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04/19/06-80079-010 150.00

**DO NOT WRITE
IN THIS SPACE**

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: Mike Schuermann MIKE SCHUERMANN 3-10-06 407-647-0060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #