

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90033 004 \*\*\*150.00

DOCUMENT # V11164

1. Corporation Name  
SPARKLE AND SHINE CLEANING SERVICE, INC.

Principal Place of Business

2016 CRYSTAL COURT S  
LAKELAND FL 33801  
US

Mailing Address

2016 CRYSTAL COURT S  
LAKELAND FL 33801  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1992

4. FEI Number

59-3105102

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 3615 Mt Tabor Rd  
Suite, Apt. #, etc.

2a. Mailing Address

26 PO Box 3417  
Suite, Apt. #, etc.

City & State

23 Lakeland FL

Zip Country

24 33810 25 USA

City & State

28 Lakeland FL

Zip Country

29 33802 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMP, JON  
2006 CRYSTAL COURT S  
LAKELAND FL 33801

81 Name

JON Camp

82 Street Address (P.O. Box Number is Not Acceptable)

3615 Mt Tabor Rd

83

84 City

Lakeland

FL

85 Zip Code

33810

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME CAMP, JON  
STREET ADDRESS 2016 CRYSTAL COURT S  
CITY-ST-ZIP LAKELAND FL

1.1 TITLE M ☒ Change ☐ Addition

1.2 NAME Camp, Jon  
1.3 STREET ADDRESS 3615 Mt Tabor Rd  
1.4 CITY-ST-ZIP Lakeland FL 33810

TITLE V ☐ DELETE

NAME CAMP, CHARLES  
STREET ADDRESS 2025 SANDFORD ROAD  
CITY-ST-ZIP LAKELAND FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME CRAWFORD, RANDOLPH  
STREET ADDRESS 322 DONNA LANE  
CITY-ST-ZIP RINGOLD GA

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Crawford, Randolph  
3.3 STREET ADDRESS 9215 Evening Shadows DR  
3.4 CITY-ST-ZIP Chattanooga TN 37421

TITLE D ☐ DELETE

NAME CRAWFORD, VALERIE  
STREET ADDRESS 322 DONNA LANE  
CITY-ST-ZIP RINGOLD GA

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME Crawford, Valerie  
4.3 STREET ADDRESS 9215 Evening Shadows Dr  
4.4 CITY-ST-ZIP Chattanooga TN 37421

TITLE ST ☐ DELETE

NAME CAMP, TERESA  
STREET ADDRESS 2016 CRYSTAL COURT S  
CITY-ST-ZIP LAKELAND FL

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME Camp, Teresa  
5.3 STREET ADDRESS 3615 Mt Tabor Rd  
5.4 CITY-ST-ZIP Lakeland FL 33810

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jon P Camp

Date

4-30-99

Daytime Phone #

(941) 665-9312

CR2E034 (11/98)