

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 590608

FILED
Apr 05, 2006
Secretary of State

Entity Name: SMITH BROS. CONTRACTING EQUIPMENT, INC.

Current Principal Place of Business:

5731 NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5731 NORTH MILITARY TRAIL
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 59-1855739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, LUCY M
12378 SAWGRASS COURT
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: SMITH, LUCY M
Address: 12378 SAWGRASS COURT
City-St-Zip: W. PALM BEACH, FL

Title: PD () Delete
Name: SMITH, SIMON
Address: 14423 DRAFT HORSE LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: VD () Delete
Name: SMITH, TOBY
Address: 5731 N MILITARY TRAIL
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SMITH, SIMON M
Address: 14423 DRAFT HORSE LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: VD (X) Change () Addition
Name: SMITH, TOBY C
Address: 5731 N MILITARY TRAIL
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUCY SMITH

STD

04/05/2006

Electronic Signature of Signing Officer or Director

_____ Date