

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000094770

FILED
Jan 14, 2011
Secretary of State

Entity Name: SMART LIFE ENTERPRISES, INC.

Current Principal Place of Business:

508 SOUTH HABANA AVENUE
335
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

508 SOUTH HABANA AVENUE
335
TAMPA, FL 33609

New Mailing Address:

FEI Number: 20-5631980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUILA, SADIE J STD
508 SOUTH HABANA AVENUE
335
TAMPA, FL 33609 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

OFFICERS AND DIRECTORS:

Title: PD
Name: AGUILA, WILFRED
Address: 508 SOUTH HABANA AVENUE, SUITE 335
City-St-Zip: TAMPA, FL 33609

Title: STD
Name: AGUILA, SADIE
Address: 508 SOUTH HABANA AVENUE, SUITE 335
City-St-Zip: TAMPA, FL 33609

Title: D
Name: SAAVEDRA, SR., MARTIN
Address: 508 SOUTH HABANA AVENUE, SUITE 335
City-St-Zip: TAMPA, FL 33609

Title: D
Name: SAAVEDRA, JANICE
Address: 508 SOUTH HABANA AVENUE, SUITE 335
City-St-Zip: TAMPA, FL 33609

I hereby 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 all other like empowered.

SIGNATURE: WILFRED AGUILA

PD

01/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date