2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2005
Secretary of State

DOCUMENT# F00000005069

Entity Name: SMARTMATIC CORPORATION

Current Principal Place of Business:

6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

New Principal Place of Business:

1001 BROKEN SOUND PARKWAY NW
STE D
BOCA RATON, FL 33487

Current Mailing Address:

6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487

New Mailing Address:

1001 BROKEN SOUND PARKWAY NW
STE D
BOCA RATON, FL 33487

FEI Number: 52-2243719 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANZOLA, ALFREDO
6400 CONGRESS AVE
STE 1300
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

ANZOLA, ALFREDO
1001 BROKEN SOUND PARKWAY NW
STE D
BOCA RATON, FL 33487 US

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: 06/30/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MUGICA, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: VSTD ( ) Delete
Name: ANZOLA, ALFREDO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: CD ( ) Delete
Name: MUGICA RIVERO, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete
Name: PINATE, ROGER
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete
Name: MUGICA SESMA, ANTONIO
Address: 19591 DINNER KEY DRIVE
City-St-Zip: BOCA RATON, FL 33498

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: CON ( ) Change (X) Addition
Name: FELIU, LUIS
Address: 339 COTTONWOOD LN
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS FELIU CON 06/30/2005
Electronic Signature of Signing Officer or Director Date