2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005069

Entity Name: SMARTMATIC CORPORATION

FILED Jul 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1001 BROKEN SOUND PARKWAY NW STE D BOCA RATON, FL 33487 **Current Mailing Address: 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: Name and Address of New Registered Agent: ANZOLA, ALFREDO 1001 BROKEN SOUND PARKWAY NW 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MUGICA, ANTONIO Name: Name: 19591 DINNER KEY DRIVE Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: VSTD Title: Title: () Delete () Change () Addition Name: ANZOLA, ALFREDO Name: 19591 DINNER KEY DRIVE Address: Address: BOCA RATON, FL 33498 City-St-Zip: City-St-Zip: () Delete Title: Title: CD () Change () Addition MUGICA RIVERO, ANTONIO Name: Name: 19591 DINNER KEY DRIVE Address: Address: BOCA RATON, FL 33498 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PINATE, ROGER Name: Name: Address: 19591 DINNER KEY DRIVE Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: Title: () Delete CON (X) Change () Addition MUGICA SESMA, ANTONIO Name: HURST, KEVIN Name: 19591 DINNER KEY DRIVE 20289 BOCA WEST DR. Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33434 Title: CON (X) Delete Title: () Change () Addition FELIU, LUIS Name: Name: 339 COTTONWOOD LN Address: Address: City-St-Zip: 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 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: PEDRO MUGICA TRE 07/06/2006