

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000070027

**Entity Name:** SMALLS-JOHNSON INC.

**Current Principal Place of Business:**

1843 SE FEDERAL HWY  
STUART, FL 34994

**FILED**  
**Mar 07, 2019**  
**Secretary of State**  
**7599306157CC**

**Current Mailing Address:**

1843 SE FEDERAL HWY  
STUART, FL 34994 US

**FEI Number: 27-0769876**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SMALLS, JAMILA T  
142 SW COVINGTON ROAD  
PORT ST LUCIE, FL 34953 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

**Officer/Director Detail :**

Title D  
Name SMALLS-JOHNSON, JAMILA T  
Address 142 SW COVINGTON ROAD  
City-State-Zip: PORT ST LUCIE FL 34953

Title D  
Name JOHNSON, DAVID A  
Address 142 SW COVINGTON ROAD  
City-State-Zip: PORT ST LUCIE FL 34953

*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: JAMILA T SMALLS-JOHNSON**

**OFFICER**

**03/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date