

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000028492

**Entity Name:** SMAT CORP.

**Current Principal Place of Business:**

4000 ISLAND BOULEVARD  
STE 301  
AVENTURA, FL 33160

**Current Mailing Address:**

4000 ISLAND BOULEVARD  
STE 301  
AVENTURA, FL 33160 US

**FEI Number:** 65-0575957

**Certificate of Status Desired:** No

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

MATUS, ALAN  
4000 ISLAND BLVD  
SUITE 301  
AVENTURA, FL 33160 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            SMITH, JACK A  
Address        4000 ISLAND BOULEVARD  
                  STE 102  
City-State-Zip: AVENTURA FL 33160

Title            D  
Name            MATUS, ALAN  
Address        4000 ISLAND BOULEVARD  
                  STE 301  
City-State-Zip: AVENTURA FL 33160

*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:** ALAN MATUS

**DIRECTOR**

**02/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date