

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000028492

**FILED  
Jan 13, 2014  
Secretary of State  
CC0900656725**

**Entity Name:** SMAT CORP.

**Current Principal Place of Business:**

2875 NE 191 ST  
402  
AVENTURA, FL 33180

**Current Mailing Address:**

2875 NE 191 ST  
402  
AVENTURA, FL 33180 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        2875 NE 191ST ST STE 402  
City-State-Zip: AVENTURA FL 33180

Title            D  
Name            MATUS, ALAN  
Address        2875 NE 191ST STREET STE 402  
City-State-Zip: AVENTURA FL 33180

*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**

**01/13/2014**

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

\_\_\_\_\_  
Date