

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # 276322

1. Entity Name
SMITH TERMINAL WAREHOUSE COMPANY



Principal Place of Business

10800 NW 97 ST
STE 102
MIAMI, FL 33178

Mailing Address

10800 NW 97 ST
STE 102
MIAMI, FL 33178

DO NOT WRITE IN THIS SPACE



04052007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1053965

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVINSON, EDWARD
PENTHOUSE EAST
407 LINCOLN ROAD
MIAMI BCH., FL 33139

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC FUTERNICK, MORRIS 10800 NW 97 ST # 102 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FUTERNICK, FRANK 10800 NW 97 ST # 102 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS FUTERNICK, LEE 10800 NW 97 ST # 102 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUTERNICK, MIRIAM 10800 NW 97 ST # 102 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/09/07-80006-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/07

Date

305-685-0325

Daytime Phone #