

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthant
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 435844 (6)

1. Corporation Name

SMITH-JONES ENTERPRISES, INC.



Principal Place of Business

10 NE 18TH ST.
HOMESTEAD FL 33030

Mailing Address

351 THOMAS MILL RD.
EASLEY SC 29640
US

3. Date Incorporated or Qualified
09/11/1973

3a. Date of Last Report
03/15/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

59-1539084

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

JONES, KAREN

~~27200 SW 100th Ave~~ 10 NE 18th St
HOMESTEAD FL ~~33030~~ 33030

Business

10. Name and Address of New Registered Agent

81 Name

KAREN JONES Mailing

82 Street Address (P.O. Box Number is Not Acceptable)

351 THOMAS MILL ROAD
EASLEY S.C.

83

84 City

FL 85 29640

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type for prior or current registered agent and its representative

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SMITH, ANNIE O
STREET ADDRESS 27200 SW 100th St. Box 10 #15
CITY, ST, ZIP HOMESTEAD FL 33030
TITLE D
NAME JONES, ELBERT F
STREET ADDRESS 351 Thomas Mill Rd
CITY, ST, ZIP EASLEY, SC 29640
TITLE STD
NAME JONES, KAREN
STREET ADDRESS 351 Thomas Mill Rd
CITY, ST, ZIP EASLEY, SC 29640
TITLE Business
NAME 10 NE 18th St
STREET ADDRESS Homestead Fl
CITY, ST, ZIP 33030

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY, ST, ZIP
5 TITLE
6 NAME
7 STREET ADDRESS
8 CITY, ST, ZIP
9 TITLE
10 NAME
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12 CITY, ST, ZIP
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14 NAME
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99 STREET ADDRESS
100 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Karen Y. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 1/25/96 804-
246-6837
Daytime Phone

CR2E034 (12/95)