


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 557060 1. Entity Name PIGGY POPPINS, INCORPORATED	
--	---

Principal Place of Business PIGGY POPPINS PAY LESS AUTO SALES 21757 N.W. 60TH AVE. MCINTOSH, FL 32664 US	Mailing Address 8341 W HIGHWAY 318 REDDICK, FL 32686
--	--



02202008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1789295	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, GEORGE E
8341 W. HIGHWAY 318
REDDICK, FL 32686

**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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000835520 02/29/08-80036-024 150.00
---	--	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, GEORGE E 8341 W. HIGHWAY 318 REDDICK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, ALMA G 8341 W. HIGHWAY 318 REDDICK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, ADRIEN D 8351 W. HIGHWAY 318 REDDICK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, KIMBERLY Y 8351 W HWY 318 REDDICK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: George E. Smith 2/14/08 352-591-1312
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #