## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # FS 1. Corporation Name SMART ENGINEERS, INC F9600000649 (1)

**FILED** Apr 24 1998 8:00am Secretary of State

| Olivani         | CHARLETTO, 1170   |  |                                   |                                |                                  |  |                                  |                      |                            |
|-----------------|---|--|-----------------------------------|--------------------------------|----------------------------------|--|----------------------------------|----------------------|----------------------------|
| Principal Place | e of Business   | Mailing Address  |                                   |                                |                                  | j 1991iba nia jenia alini abini abini abini abini  | \$111 <b>46</b> 111 <b>49</b> 11 | # BI111 BIE          | .00 1001 1001              |
| P.O. BOX 318    | 1   | P.O. BOX 3181  |                                   |                                |                                  |  |                                  |                      |                            |
| VALDOSTA GA     | A 31604-3181  | VALDOSTA GA 31604-3181                                     |                                   |                                |                                  | 00.107.110175.11   | ******                           |                      |                            |
|                 |   |  |                                   |                                |                                  | DO NOT WRITE IN  | THIS SPA                         | CE                   |                            |
|                 |   |  |                                   |                                |                                  | 3. Date Incorporated or Qualified 02/08/1996   |                                  |                      |                            |
| 2. Principal Pl | ace of Business   | 2a. Mailing Address  |                                   |                                | 4. FEI Number                    |  | Ar                               | oplied For           |                            |
| 21              |   | 26   |                                   |                                | 58-2164698                       |  |                                  | ot Applicable        |                            |
| Suite, Apt.     | #, etc.   | Suite, Apt. #, etc.  |                                   |                                | 5. Certificate of Status Desired | _  |                                  | Additional           |                            |
| 22              |   | 27   |                                   |                                |                                  |  |                                  | equired              |                            |
| City & State    | •   | City & State   |                                   |                                | 6. Election Campaign Financing   |  |                                  | May 8e               |                            |
| 23              |   | 26   |                                   |                                |                                  |  |                                  |                      | to Fees                    |
| Zip             | Country   | Zip  | }                                 |                                |                                  | 8. This corporation owes or has paid t   |                                  | : year Int           | angible                    |
| 24              | [25]<br>9. Name and Address of Curr   | 29   | 30                                | r                              |                                  | Personal Property Tax due June 30  10. Name and Address of New Regis                       |                                  |                      | No                         |
| DD/             |   | eur vedistelen wäeur                                       |                                   | 81                             | Name                             | (U, Nallia aliu Audiess Ul Naw Negla   | ISISO AYS                        | , rit                |                            |
|                 | ANT, ROBERT W   |  |                                   | "  '                           | Name                             |  |                                  |                      |                            |
|                 | 9 N.W. 74TH PLACE   |  | 82 Stree                          |                                |                                  | ss (P.O. Box Number is Not Acceptable)   |                                  |                      |                            |
| GAI             | NESVILLE FL 32606   |  |                                   | 83                             | ·                                |  |                                  |                      |                            |
|                 |   |  |                                   | 63                             |                                  |  |                                  |                      |                            |
|                 |   |  |                                   | 64                             | City                             |  | F. 8                             | <b>5</b> Zip (       | Code                       |
|                 |   |  |                                   | Ш.                             |                                  | <del></del>  | <u>FL</u>                        |                      |                            |
| 11. Pursuant t  | lo the provisions of Sections 607.0<br>agistered agent, or both, in the Sta | 502 and 607.1508, Florida 8<br>ite of Florida. Such change | Statutes, the al<br>was authorize | bove-r<br>d by th              | named corpo<br>he corporatio     | ration submits this statement for the purp<br>in's board of directors. I hereby accept the | ose of cha<br>he appoint         | anging it<br>ment as | s registered<br>registered |
| agent. I ar     | m familiar with, and accept the ob-   | ligations of, Section 607.050                              | 5, Florida Stat                   | lutes.                         |                                  | ,  |                                  |                      |                            |
| SIGNATURE       |   |  |                                   |                                |                                  |  |                                  |                      |                            |
|                 | Signature, lyped or printed name of registered i                            | <del> </del>   |                                   | d Agent                        | signature required               |  | DATE                             | DEOTOE               | 20 11 40                   |
| 12.             | PT OFFICERS A   | AND DIRECTORS  | 13.                               | *. F                           | <u> </u>                         | ADDITIONS/CHANGES TO OFFICER   |                                  | Change               | Addition                   |
| TITLE           | SMART, JOHN L   |  |                                   | 1.1 TITLE                      |                                  |  | L-J                              | Criarigo             | AGGINION                   |
| NAME            | 2304 OAKRIDGE AVE.  |  |                                   | 1.2 NAME<br>1.3 STREET ADDRESS |                                  |  |                                  |                      |                            |
| STREET ADDRESS  | VALDOSTA GA   |  |                                   |                                | · 1                              |  |                                  |                      | ]                          |
| CITY-ST-ZIP     | VS  | Dect   |                                   | TY-ST-                         | ZIP                              | <del></del>  |                                  | Channa               | Addition                   |
| TITLE           | SMART, SARAH B  |  |                                   | 2.1 TITLE                      |                                  |  | ب                                | Change               | Magazini i                 |
| NAME            | 2304 OAKRIDGE AVE.  |  |                                   | 2.2 NAME                       |                                  |  |                                  |                      |                            |
| STREET ADDRESS  | VALDOSTA GA   |  |                                   | 2.3 STREET ADDRESS             |                                  |  |                                  |                      |                            |
| CITY-ST-ZIP     | VALUOSIA GA   | T brutt  |                                   | IIY-SI-                        | ZIP                              |  |                                  | Change               | Addition                   |
| TITLE           |   | DELET  |                                   |                                |                                  |  | L                                | Change               | ריי איניוייניטא נייי       |
| NAME            |   | 32   |                                   |                                |                                  |  |                                  |                      |                            |
| STREET ADDRESS  |   |  |                                   | IREET AD                       | - 1                              |  |                                  |                      |                            |
| CITY-ST-ZIP     |   | DELET  |                                   | ITY-ST-                        | ZIP                              |  |                                  | Change               | Addition                   |
| TITLE           |   | UELEI  |                                   |                                |                                  |  | ப                                | CHAINGE              | Noontoil                   |
| NAME            |   |  | 4, 2 N                            |                                |                                  |  |                                  |                      |                            |
| STREET ADDRESS  |   |  |                                   | irieet ad                      |                                  |  |                                  |                      |                            |
| CITY-ST-2IP     | <del></del>   | □ DELET  |                                   | TY-ST-7                        | ZIP                              |  |                                  | Change               | Addition                   |
| THILE           |   | DELET  |                                   |                                |                                  |  |                                  | onange               | Addition                   |
| NAME            |   |  | 5.2 N/                            |                                |                                  |  |                                  |                      |                            |
| STREET ADDRESS  |   |  |                                   | IREET AD                       |                                  |  |                                  |                      |                            |
| CITY-ST-ZIP     |   | DELET  | _                                 | TY-ST-7                        | ZIP                              |  | <del></del>                      | Change               | Addition                   |
| TITLE           |   | ☐ DELET  |                                   |                                |                                  |  | u                                | Change               | Addition                   |
| NAME            |   |  | 6.2 N/                            |                                |                                  |  |                                  |                      |                            |
| STREET ADDRESS  |   |  | 6.3 \$1                           | REET AD                        | DRESS                            |  |                                  |                      |                            |
| CITY CT 71D     |   |  | <b>■</b> 6.4 ^4                   | TV CT 1                        | MD I                             |  |                                  |                      |                            |

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in an attaniment with an address.