2005 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 21, 2005 08:00 AM **Secretary of State DOCUMENT # H25448** 1. Entity Name T. E. SMITH, INC. Principal Place of Business_____ Mailing Address 1501 VENERA P.O. BOX 14-2096 #320 CORAL GABLES, FL 33134 US CORAL GABLES, 33 33146 CR2E034 (10/03) 03052005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2511133 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, TOM E DO NOT WRITE 7280 SW 53RD AVE MIAMI, FL 33143 IN THIS SPACE 3. 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. 1 am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550,00 10, OFFICERS AND DIRECTORS TITLE NAME SMITH, TOM E 7330 SW 55TH AVE. STREET ADDRESS CITY-ST-ZIP S. MIAMI, FL 33143 000000270778 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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

changed, or on an attachment with an address

SIGNATURE:

FILED