

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J49284 (9)

1. Corporation Name
SMB HOLDINGS, INC.



Principal Place of Business
5036 SANDPIPER LANE S
ST PETERSBURG FL 33711
US

Mailing Address
P O BOX 58083
ST PETERSBURG FL 33715
US

3. Date Incorporated or Qualified 12/30/1986
3a. Date of Last Report 02/24/1995

2. Principal Place of Business
21 3036 SANDPIPER INS.
Suite, Apt. #, etc.
22
City & State
23 ST. PETERSBURG
Zip
24 33711 Country
25 USA

2a. Mailing Address
26 P.O. BOX 58083
Suite, Apt. #, etc.
27
City & State
28 ST. PETERSBURG
Zip
29 33715 Country
30 USA

4. FEI Number 59-2771578
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

BROWN, STANFORD M
5036 SANDPIPER LANE S
ST. PETERSBURG FL 33711

10. Name and Address of New Registered Agent

81 Name BROWN, STANFORD M
82 Street Address (P.O. Box Number is Not Acceptable)
5036 SANDPIPER INS.
83
84 City ST. PETERSBURG FL 85 Zip Code 33711

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, typed or printed name of registered agent, and date if applicable

(NOTE: Registered Agent signature is required when re-submitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
PST	BROWN, STANFORD M.	5036 SANDPIPER LANE S	ST. PETERSBURG FL	<input type="checkbox"/>
VPD	BROWN, PATRICIA F.	5036 SANDPIPER LANE S	ST. PETERSBURG FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	1.5 DELETE	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP	2.5 DELETE
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>

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:

Stanford M Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-96 (813) 864-9414
Date Daytime Phone #

CR2E034 (12/95)