

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # J57077

1. Entity Name
SMACS HOLDING CORP.



Principal Place of Business
1241 GULF OF MEXICO DRIVE
SUITE 408
SARASOTA, FL 34228 US

Mailing Address
1241 GULF OF MEXICO DRIVE
SUITE 408
SARASOTA, FL 34228 US



01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FREEDMAN, ANNELIES
1241 GULF OF MEXICO DRIVE
SUITE 408
SARASOTA, FL 34228

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME FREEDMAN, ANNELIES
STREET ADDRESS 1241 GULF OF MEXICO DRIVE
CITY - ST - ZIP SARASOTA, FL

TITLE S
NAME FREEDMAN, MICHAEL
STREET ADDRESS 1345 W. WAY DRIVE
CITY - ST - ZIP SARASOTA, FL

TITLE AS
NAME HARRIS, FREEDMAN
STREET ADDRESS 1241 GULF OF MEXICO DRIVE
CITY - ST - ZIP SARASOTA, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

000000608504
02/01/07-80013-019 150.00

**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: _____

Harris Freedman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/07 *917533-2914*
Date Daytime Phone #