FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** FLORIDA DEPARTMENT OF STATE Feb 05 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # (0)J82051 SMART PAYROLL SOLUTIONS, INC. Mailing Address Principal Place of Business 12734 KENWOOD LN, STE-5-12734 KENWOOD LN. STE-5-FT MYERS FL 33907 FT MYERS FL 33907 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 06/22/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-28 18339 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required Suite Suite City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 29 Personal Property Tax due June 30. Yes Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LAMBERT, THOMAS 12734 KENWOOD LANE, STE 5-Street Address (P.O. Box Number Is Not Acceptable) FT MYERS FL 33907 Zip Code 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition NAME LAMBERT, THOMAS W 1.2 NAME 12734 KENWOOD LANE, STE 5-STREET ADDRESS Suite 4 1.3 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 1.4 CITY - ST - ZIP ☐ DELETE TITE F 2.1 TITLE Change Addition LAMBERT, MARTHA M NAME 2.2 NAME 12734 KENWOOD LANE, STE-5-STREET ADDRESS Suite 4 2.3 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 2, 4 CITY - ST - ZIP DELETE TITLE Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 TITLE Change ___ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby 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 on as attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADORESS

CITY - ST-ZIP

Martha M. Tambet

DELETE

1/27/98

941-939-2210

Change

Addition