

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
(DIVISION OF CORPORATIONS)

95 MAR 28 PM 5: 37

DOCUMENT # K61558 (8)

1. Corporation Name

SMG MANAGEMENT COMPANY

Principal Place of Business

**2717 W. CYPRESS CREEK ROAD
2717 W. CYPRESS CREEK ROAD
FT. LAUDERDALE FL 33309**

Mailing Address

**2717 W. CYPRESS CREEK ROAD
2717 W. CYPRESS CREEK ROAD
FT. LAUDERDALE FL 33309**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1989

3a. Date of Last Report

02/15/1994

4. FEI Number

65-0133970

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

2b

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THIRER, MARTIN
2717 W. CYPRESS CREEK ROAD
SUITE 200
FT. LAUDERDALE, FL 33309**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 this corporation

(Date) Registered Agent signature required when instituting

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PS
GOLDING, STEPHEN M.
159 S.W 100 TERR.
CORAL SPRINGS FL**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VPT
GOLDING, DEENA G.
159 S.W 100 TERR.
CORAL SPRINGS FL**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(g), 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 liquidator of the corporation, and that my signature was required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an amendment to this report.

SIGNATURE: Stephen M. Golding

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/95

(Date)

970-9600

(Telephone Number)