

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000012118

FILED
Sep 12, 2002
Secretary of State

Entity Name: SMASHEM L.L.C.

Current Principal Place of Business:

3985 CORTEZ ROAD WEST
BRADENTON, FL 34210

New Principal Place of Business:

Current Mailing Address:

3985 CORTEZ ROAD WEST
BRADENTON, FL 34210

New Mailing Address:

FEI Number: 52-2265455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRENCH, C. TED ESQ.
C/O DICKINSON & GIBBONS, P.A.
1750 RINGLING BLVD.
SSARASOTA, FL 34236 US

Name and Address of New Registered Agent:

FRENCH, C. TED ESQ.
2033 MAIN STREET
SUITE 304
SARASOTA, FL 34237 US

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.

SIGNATURE:

09/12/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: VPT () Delete
Name: KRAUSS, GWEN A
Address: 3430 AVENIDA DEL MARE
City-St-Zip: SARASOTA, FL 34242

Title: P () Delete
Name: ROUSSINOS, DENISE W
Address: 4601 35TH COURT EAST
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROUSSINOS, DEAN S
Address: 4601 35TH COURT EAST
City-St-Zip: BRADENTON, FL 34203

Title: MGRM (X) Change () Addition
Name: ROUSSINOS, DENISE W
Address: 4601 35TH COURT EAST
City-St-Zip: BRADENTON, FL 34203

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DENISE W. ROUSSINOS

MGRM

09/12/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date