


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000035336</b> 1. Entity Name SMART WOOD CARPENTRY LLC	
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Principal Place of Business 16909 NORTHBAY RD SUITE #321 SUNNY ISLES BEACH, FL 33160 US	Mailing Address 16909 NORTHBAY RD SUITE #321 SUNNY ISLES BEACH, FL 33160 US
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04122007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-2658750	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

CENTOFANTI, JORGE M  
16909 NORTHBAY RD  
SUITE #321  
SUNNY ISLES BEACH, FL 33160

**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

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CENTOFANTI, JORGE M 16909 NORTHBAY RD SUITE #321 SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MADRID, DIANA 16909 NORTHBAY RD SUITE #321 SUNNY ISLES BEACH, FL 33160
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**DO NOT WRITE  
IN THIS SPACE**

U000000715101  
04/27/07-80048-025 50.00

11. 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 is true and accurate and that my 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:**

*Diana Madrid*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*mer*

*4/12/07*

Date

Daytime Phone #