2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2012
Secretary of State

DOCUMENT# N11000005667

Entity Name: SOMETHING TO SMILE ABOUT, INC.

Current Principal Place of Business:

501 SE 2ND STREET
APT. #416
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

1209 TEQUESTA ST
FORT LAUDERDALE, FL 33312

Current Mailing Address:

501 SE 2ND STREET
APT. #416
FORT LAUDERDALE, FL 33301

New Mailing Address:

1209 TEQUESTA ST
FORT LAUDERDALE, FL 33312

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, ALLISON M
501 SE 2ND STREET
APT. #416
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

WILLIAMS, ALLISON M
1209 TEQUESTA ST
FORT LAUDERDALE, FL 33312 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: 04/18/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: WILLIAMS, ALLISON M
Address: 1209 TEQUESTA ST
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VP
Name: WILLIAMS, LINDSEY A
Address: 501 SE 2ND STREET, APT. #416
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP
Name: WILLIAMS-GOMEZ, CARRIE R
Address: 3025 KING STREET
City-St-Zip: ALEXANDRIA, VA 39564

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLISON M WILLIAMS MS 04/18/2012
Electronic Signature of Signing Officer or Director — Date