

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094576

Entity Name: SMPT., INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2270 N US 1
FT. PIERCE, FL 34946

New Principal Place of Business:

351 ANCHOR WAY
FT. PIERCE, FL 34946

Current Mailing Address:

2270 N US 1
FT. PIERCE, FL 34946

New Mailing Address:

351 ANCHOR WAY
FT. PIERCE, FL 34946

FEI Number: 65-1046136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMASSI, PATRIZIO
351 ANCHOR WAY
ST LUCIE, FL 34946 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOMASSI, ASSUNTA
Address: 2270 N US 1
City-St-Zip: FT. PIERCE, FL 34946

Title: VP () Delete
Name: TOMASSI, PATRICK
Address: 2270 N US 1
City-St-Zip: FT. PIERCE, FL 34946

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRIZIO TOMASSI

V/P

04/28/2008

Electronic Signature of Signing Officer or Director

Date