## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT		DIOSIA	UDK)	04-24-2006 90377	033 ***150.00
1. Entity Name	, , , , , , , , , , , , , , , , , ,				
S.M. PRODUCTIONS	SINC				
S.M. PRODUCTIONS	S INC	<b> </b>			
DO N	IOT WRIT	TE IN THIS S	PACE		
2. Principal Place of Business 2290 WEST 74TH ST		3. Mailing Address SAME		1001212	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		40061242 WRITE IN	THIS SPACE
City & State		SAME City & State		4. FEI Number	Applied For
HIALEAH, FL	0	SAME	T-0-1	65-1081765	Not Applicable
Zip 33016	Country	Zip SAME	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			·	me and Address of Current F	
_			Name MARTINEZ, S	SANTIAGO	
1	DO NOT I		Street Add	ess (P.O. Box Number is Not Acceptable)	
	IN THIS S	PACE	2270 WEST 7	74TH ST	
			O't		
			City HIALEAH	•	Zip Code 33016
8. The above named	d entity submits thi	s statement for the purpos and accept the obligations	e of changing its reg	istered office or registered age	nt, or both, in the
SIGNATURE	on rannar mar, c	and accept the obligations	or registered agent.		
Signat		ne of registered agent and title if a	pplicable. (NOTE: Regis	stered Agent signature required when re	einstating) DATE
	i - May 1 Fee is \$1 Nay 1, Fee is \$550.			9. Election Campaign Financin	g \$5.00 May Be
Amer	ided UBR is \$61.2	25		Trust Fund Contribution.	Added to Fees
Make Check Payab	OFFICERS	S AND DIRECTORS	11.	'	
TITLE NAME	PRESIDENT	SUNDO SANTIASO	TITLE		
STREET ADDRESS	2270 WEST 74T	н ѕт	NAME STREET ADDRES	SS	
CITY-ST-ZIP TITLE	HIALEAH FLA 33	3016	CITY-ST-ZIP		
NAME			TITLE NAME		
STREET ADDRESS			STREET ADDRES	ss	
CITY-ST-ZIP TITLE			CITY-ST-ZIP TITLE		
NAME STREET ADDRESS			NAME	,,	
CITY-ST-ZIP			STREET ADDRES CITY-ST-ZIP	<u> </u>	WRITE
TITLE NAME			TITLE NAME	IN THIS	SPACE
STREET ADDRESS			STREET ADDRES		0.7.02
CITY-ST-ZIP TITLE			CITY-ST-ZIP TITLE		
NAME			NAME		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	SS	
TITLE		·	CITY-ST-ZIP TITLE		
NAME			NAME		
STREET ADDRESS CITY-ST-ZIP	<u> </u>		STREET ADDRES		
12. I hereby certify that	the information supp	olied with this filing does not qu	ualify for the exemption	stated in Section 119.07(3)(i), Flor	rida Statutes. I further
as if made under or	mation indicated on tath; that I am an offic	mis report or supplemental rep er or director of the corporatio	ooπ is true and accurate in or the receiver or trus	e and that my signature shall have stee empowered to execute this rep	the same legal effect port as required by
Chapter 607, Florid	a Statutes; and that	my name appears in Block 10	or on an attachment w	ith an address, with all other like e	mpowered.
	1441				
SIGNATURE:	////	MARTINEZ, SA	ANTIAGO PRESIDEI	NT 4/8/2006	786-586-3836
SIGN	MA JURE AND TYPE	O OR PRINTED NAME OF SI	GNING OFFICER OR E	DIRECTOR Date	Daytime Phone #

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

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1. Entity Name	(	` )					
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S.M. PRODUCTIO	INS INC	<del></del>		<del></del>			
				·	ATT 0 01 11	1 P 1 1 49	
DO	NOT WRI	TE IN THIS	SPA	CE	ATTACHM	IENI	
i		111111111111111111111111111111111111111	(ma) v i				
2. Principal Place of Business		3. Mailing Address			40010174	12	
2290 WEST 74TH ST		SAME			700010	1000	
Suite, Apt. #, e	etc.	Suite, Apt. #,	etc.		DO NOT WRITE IN TH	HIS SPACE	
101 City & State	<u>.</u>	SAME City & State			4. FEI Number	Applied For	
HIALEAH, FL		SAME			65-1081765	Not Applicable	
Zip	Country	Zip		ountry		\$8.75 Additional	
33016	USA	SAME	USA	· ·	5. Certificate of Status Desired	Fee Required	
33010	JUSA	IQVIAIT'	1007		ne and Address of Current Reg		
				Name	le and Address of Current Neg	istered Agent	
	DO NOT	MOTE		MARTINEZ, S	ANTIAGO		
	DO NOT	WKIIE		Street Address (P.O. Box Number is Not Acceptable)			
	IN THIS	CDACE		2270 WEST 74TH ST			
ſ	IIA I LIIQ	JUNCE					
				-		7 0 4	
				City	FL	Zip Code 33016	
8 The above no	mod antity cubmits t	his statement for the nu	urnoco of c		stered office or registered agent,		
		and accept the obligat			stered office of registered agent,	or boar, in the	
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SIGNATURE _			n. E.	1 010TE D 1-1		-1'> <b>DATE</b>	
	ry 1 - May 1 Fee is \$	ame of registered agent and to	iue ir applicap	ie. (NOTE: Regist	tered Agent signature required when reinst	ating) DATE	
	er May 1, Fee is \$55				9. Election Campaign Financing	\$5.00 May Be	
	mended UBR is \$61				Trust Fund Contribution.	Added to Fees	
Make Check Pay	able to Florida Dep	partment of State					
10.	OFFICE	RS AND DIRECTORS	11.				
TITLE	PRESIDENT	CUNDO		ITLE			
NAME STREET ADDRES				NAME CTREET ADDRESS			
		TH ST	C.	TREET ADDRESS	e l		
L CITY-ST-ZIP	ss   2270 WEST 74			TREET ADDRESS	S		
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	ss   2270 WEST 74		<u> </u>	ITY-ST-ZIP	S		
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