

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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

04-24-2006 90377 033 ***150.00

DOCUMENT # <i>P01000010564</i>	
1. Entity Name	
S.M. PRODUCTIONS INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2290 WEST 74TH ST Suite, Apt. #, etc. 101		3. Mailing Address SAME Suite, Apt. #, etc. SAME	
City & State HIALEAH, FL		City & State SAME	
Zip 33016	Country USA	Zip SAME	Country USA

40061242

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1081765	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name MARTINEZ, SANTIAGO	
Street Address (P.O. Box Number is Not Acceptable) 2270 WEST 74TH ST	
City HIALEAH	Zip Code 33016

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MARTINEZ, <i>SEGUNDO SANTIAGO</i> 2270 WEST 74TH ST HIALEAH FLA 33016
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

MARTINEZ, SANTIAGO PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/2006
Date

786-586-3836
Daytime Phone #

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

ATX1

DOCUMENT # <u>P01000010564</u> 1. Entity Name S.M. PRODUCTIONS INC	
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ATTACHMENT

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4/8/2006

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Date

Daytime Phone #