## **2008 FOR PROFIT CORPORATION**

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SI

## Mar 06, 2008 8:00 am **ANNUAL REPORT** Secretary of State DOGUMENT # P01000047176 03-06-2008 90044 046 \*\*\*150.00 1. Entity Name SMART RECORDS MANAGEMENT, INC. Principal Place of Business Mailing Address 400 SUB STATION RD 400 SUB STATION RD 40039679 VENICE, FL 34292 VENICE, FL 34292 01042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1112716 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEED, LLOYD DO NOT WRITE 400 SUB STATION RD VENICE, FL 34292 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME DEATERLY, DEE STREET ADDRESS **401 SUB STATION RD** CITY-ST-ZIP VENICE, FL 34285 TITLE NAME WEED, LLOYD STREET ADDRESS 401 SUB STATION RD CITY-ST-ZIP VENICE, FL 34285 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, i further certify that the information indicated on this report or supplemental report is true and accurate and that prograture 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 Block 11 if changed, or on an attachment with an address of the empowered.

G OFFICER OR DIRECTOR

FILED