FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P010000 49633

1. Entity Name

SIGNATURE: ___



FILED Apr 26, 2004 8:00 am Secretary of State 04-26-2004 91033 050 ***150.00

E.J. SMITH, INC.									
DO N	OT WRITE	IN THIS SP	ACE						
2. Principal Place of Busin	CELLA 26								
Suite, Apt. #, etc.	FIRE LAWE	Suite, Apt. #, etc.	2557 Nursery RD. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State OLDSMAR	Fc. 34677	CLEARWATE	A, FC.		S9-37	27005	Applied For Not Applicable		
Zip 34677	Country A	^{Zip} 33764	Country SA		ertificate of Status E		8.75 Additional ee Required		
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	N THIS SP	ACE		78 27)				
			City	FALU	ATTEL	FL	Zip Code		
		the purpose of changing its r	egistered office or	registered age	nt, or both, in the St	ate of Florida. I am far	niliar with, and accept		
the obligations of regist	iereu ageni.								
SIGNATURE Signature, typed	or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signatur	re required when rein	nstating)	DATE			
After May	ay 1 Fee is \$150.00 1, Fee is \$550.00 I UBR is \$61.25				9. Election Camp		\$5.00 May Be Added to Fees		
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	e information supplied with	this filing does not qualify for		ed in Section 1	19.07(3)(j). Florida :	Statutes. I further certi	fy that the information		
 I hereby certify that the indicated on this report of the corporation or the attachment with an action of the corporation. 	e intormation supplied with rt or supplemental report is the receiver or trustee emp ddress, with all other like em	this filing does not qualify for true and accurate and that m ower of to execute this report professed.	the exemption stated stated in the signature shall he tas required by Charles in the stated in the s	ed in Section 1 ave the same le napter 607, Flor 	19.07(3)(i), Florida (egal effect as if mad rida Statutes; and th	statutes. I further certifie under oath; that I an nat my name appears	ry that the information n an officer or director in Block 10 or on an		