

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90071 030 ***150.00

DOCUMENT # P01000106345

1. Entity Name

SMART!SOLUXIONS, INC.



Principal Place of Business

**14707 SOUTH DIXIE HWY
SUITE 211
MIAMI FL 33176**

Mailing Address

**14707 SOUTH DIXIE HWY
SUITE 211
MIAMI FL 33176**

14002061



MOORE CR2E034 (11/03)

2. Principal Place of Business

47 South Prospect Dr
Suite, Apt. #, etc.

3. Mailing Address

47 South Prospect Dr
Suite, Apt. #, etc.

City & State

Coral Gables FL

City & State

Coral Gables, FL

4. FEI Number

65-1152290

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HERMAN, MICHAEL S.
14707 SOUTH DIXIE HWY, SUITE 211
MIAMI FL 33176**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

47 South Prospect Drive

City

Coral Gables

FL

Zip Code

33133

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] **Michael S. Herman CEO 4/9/04**

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HERMAN, MICHAEL S CEO**
STREET ADDRESS **14707 S. DIXIE HWY #211**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **D** ☐ Delete
NAME **LOUNDAGIN, PETER L COO**
STREET ADDRESS **9285 TEDDY LANE #215-**
CITY-ST-ZIP **LONE TREE CO 80124**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **47 South Prospect Drive**
CITY-ST-ZIP **Coral Gables FL 33133**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4555 WEST MINERAL DRIVE**
CITY-ST-ZIP **LITTLETON CO 80128**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] **Michael S. Herman CEO 4/9/04 305 776 2145**