

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000006346

FILED
Jan 20, 2004
Secretary of State

Entity Name: MARTY SMITH AUTO & RV REPAIR, INC.

Current Principal Place of Business:

5136 SOUTH ROAD
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

5139 SOUTH ROAD
NEW PORT RICHEY, FL 34652

Current Mailing Address:

5136 SOUTH ROAD
NEW PORT RICHEY, FL 34652

New Mailing Address:

5139 SOUTH ROAD
NEW PORT RICHEY, FL 34652

FEI Number: 71-0868333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MARTY J
5136 SOUTH RD
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

SMITH, MARTY J
5139 SOUTH RD
NEW PORT RICHEY, FL 34652 US

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.

SIGNATURE: _____

01/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, MARTY J
Address: 5136 SOUTH ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VSTD () Delete
Name: SMITH, PEGGY E
Address: 5136 SOUTH ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, MARTY J
Address: 5139 SOUTH ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VSTD (X) Change () Addition
Name: SMITH, PEGGY E
Address: 5139 SOUTH ROAD
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTY J SMITH

PD

01/20/2004

Electronic Signature of Signing Officer or Director

Date