DOCUME 1. Entity Name SMART SCH		00069615		UBR)		Apr 23, 20 Secretary 04-23-2003 9012		
Principal Place of I 2311 N 12TH AVE PENSACOLA FL 32		Mailing Address 2311 N 12TH AVE PENSACOLA FL 32503	1			6002	1960 	
2. Principal Place	of Business	3. Mailing Address						
Suite, Apt. #, et	tc.	Suite, Apt. #, etc.					KING CHANGES	5
City & State		City & State		4.		4. FEI Number		<u> </u>
Zip	Country	Zip	Coun	ntry	5.	<u>06 - 1638398</u> Certificate of Status Desired	¢9.75 .	
6	5. Name and Address of Curren	t Registered Agent				Name and Address of New Registe		
Committe, B	RUCE ESO		·•• ·	Name _				
17 S PALAFO	)X ST, STE 306			Street Ac	ddress (P.O. E	Box Number is Not Acceptable)		
PENSACOLA F	FL 32501					- i Mag		
				City			FL   Zip Coo	le
		· · · · · · · · · · · · · · · · · · ·		<u> </u>				
	ned entity submits this statement f of registered agent.	or the purpose of changing	its registere	ed office or	registered ag	gent, or both, in the State of Florida.	I am familiar with,	and accept
the obligations	of registered agent.							and accept
the obligations of SIGNATURE	of registered agent.				registered ag		I am familiar with	and accept
the obligations of SIGNATURE	of registered agent.	t and title if applicable. (I					9 _ <b>\$5.(</b>	and accept
the obligations of SIGNATURE	of registered agent. ature, typed or printed name of registered agen NOW!!! FEE IS \$150.00 y 1, 2003 Fee will be \$550.00 yable to Florida Department of OFFICERS ANE	t and title if applicable. () of State D DIRECTORS	NOTE: Registered	d Agent signatu	re required when r	reinstating) c	g \$5.0 Adde	DO May Be d to Fees
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