

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2003 8:00 am
Secretary of State

08-13-2003 90074 028 ***150.00

DOCUMENT # P02000110440

1. Entity Name
SM MEDIA, INC.



Principal Place of Business
91 SW 3 STREET
POMPANO BEACH FL 33060

Mailing Address
91 SW 3 STREET
POMPANO BEACH FL 33060

2. Principal Place of Business

1775 Blount rd.
Suite, Apt. #, etc.
401

3. Mailing Address

1775 Blount rd.
Suite, Apt. #, etc.
401

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

Zip
33069

Country
USA

Zip
33069

Country
USA

4. FEI Number

42-155-8152

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MORENO, AL
91 SW 3 STREET
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7.21.03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 PSTD
NAME MORENO, AL
STREET ADDRESS 91 SW 3 STREET
CITY-ST-ZIP POMPANO BEACH FL 33060

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

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 REQUIRED

7.21.03

954.471.4003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80138122

#PD2000110440

SM Media, Inc.

**1775 Blount Road, Suite 401, Pompano Beach, Florida, 33069
954.471.4003 . amoreno@websitejunkies.net**

July 21, 2003

**Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500**

To whom it may concern:

As requested, we have attached this letter stating that our corporation did not receive a notice prior to the papers we recently received. We are requesting the waiving of the late fee. Enclosed is a check for the amount of \$150.00.

Thank you for your time.

Sincerely,



Al Moreno
