2006 FOR PROFIT CORPORATION_ ANNUAL REPORT

Apr 11, 2006 08:00 AM Secretary of State DOCUMENT # P03000037604 1. Entity Name SMITH AUTOMOTIVE, INC. Principal Place of Business Mailing Address 5890 PARK BOULEVARD **5890 PARK BOULEVARD** PINELLAS PARK, FL 33781 PINELLAS PARK, FL 33781 No Chg-P CRZE034 (11/05) 02172008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-3678558 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SMITH, PAUL J 5890 PARK BOULEVARD PINELLAS PARK, FL 33781 IN THIS SPACE 3. 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, typed or printed name of registered agent and title if applicable. DATE INDTE: Registered Agent signalure required when reinstailing) \$5.00 May Be FILE NOWIN FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Added to Fees Trust Fund Contribution. 10. TITLE SMITH, PAUL J NAME 15519 DARIEN WAY STREET ACCRESS CITY-ST-ZIP CLEARWATER, FL 33764 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STITEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 807. Florida Statutes; and that my pame appears in Block 10 or Block 11 if

SIGNATURE: _1

FILED

Daytima Phone #