

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2007 8:00 am
Secretary of State

07-11-2007 90073 017 ***150.00

DOCUMENT # P03000045580
1. Entity Name
SMITH COMMERCIAL GROUP OF BROWARD, INC.



Principal Place of Business
**1065 NE 204 TERRACE
MIAMI, FL 33179**

Mailing Address
**4300 SW 73RD AVENUE
SUITE 105
MIAMI, FL 33155**

40124134



07022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3116215	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CRUZ, JOSEPHINE
4300 SW 73RD AVENUE
SUITE 105
MIAMI, FL 33155**

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IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, ALAN 1230 NW 7TH ST. MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WEIL, GEORGE 1230 NW 7TH ST MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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: Alan Smith 7-5-07 305-262-6684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dispute Phone #

ATTACHMENT
40124134

Smith Commercial Group of Broward, Inc.

July 5, 2007

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

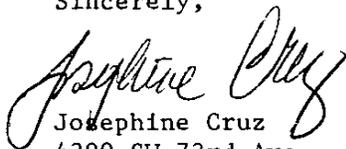
Ref: 2007 Annual Report
EIN #75-3116215
Document #P03000045580

Gentlemen:

We are enclosing our check #501 in the amount of \$150.00, and hereby request that you kindly waive the \$400.00 fee. We had not filed our 2007 Annual Report because we did not get notification until we received your "Notice of Intent to Dissolve," last week.

Thanking you in advance for your kind consideration to this request.

Sincerely,



Josephine Cruz
4300 SW 73rd Ave
Suite 105
Miami, FL 33155



Smith Commercial Group of Broward, Inc.
1065 NE 20th Terrace
Miami, FL 33179
305-785-6846 T • 305-655-0529 F