2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 24, 2008
Secretary of State

DOCUMENT# P03000053179

Entity Name: SMOOTH CAPITAL MORTGAGE INC.

Current Principal Place of Business:

407 WEKIVA SPRINGS RD.
SUITE 241
LONGWOOD, FL 32779

New Principal Place of Business:

217 NOB HILL CIRCLE
LONGWOOD, FL 32779

Current Mailing Address:

407 WEKIVA SPRINGS RD.
SUITE 241
LONGWOOD, FL 32779

New Mailing Address:

217 NOB HILL CIRCLE
LONGWOOD, FL 32779

FEI Number: 06-1695075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TIME, JUSTIN
407 WEKIVA SPRINGS RD SUITE #241
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

TIME, JUSTIN
217 NOB HILL CIRCLE
LONGWOOD, FL 32779 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: _____ 09/24/2008
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: TIME, JUSTIN
Address: 407 WEKIVA SPRINGS RD., # 241
City-St-Zip: LONGWOOD, FL 32779

Title: VP ( ) Delete
Name: TIME, DEBBIE
Address: 407 WEKIVA SPRINGS RD STE 241
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: TIME, JUSTIN
Address: 217 NOB HILL CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: VP (X) Change ( ) Addition
Name: TIME, DEBBIE
Address: 217 NOB HILL CIRCLE
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JUSTIN TIME PSD 09/24/2008
Electronic Signature of Signing Officer or Director — Date