


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 08, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000127562	
1. Entity Name SMART CONSIGNMENT, INC.	
	
Principal Place of Business 832 S FLORIDA AVE LAKELAND, FL 33801	Mailing Address 832 S FLORIDA AVE LAKELAND, FL 33801



08302006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0402158	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SMITH, H. GUY 832 S FLORIDA AVE LAKELAND, FL 33801		DO NOT WRITE IN THIS SPACE
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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)
Signature, typed or printed name of registered agent and title if applicable. **U00000576530**
09/08/06-80003-001 550.00 DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

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	D SMITH, H. GUY 832 S FLORIDA AVE LAKELAND, FL 33801
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/30/06

Date

863-688-7766

Daytime Phone #