

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153889

Entity Name: SMILE TECH, INC.

FILED
Jul 21, 2008
Secretary of State

Current Principal Place of Business:

612 NORTH HUDSON STREET
ORLANDO, FL 328087560 US

New Principal Place of Business:

Current Mailing Address:

612 N HUDSON STREET
ORLANDO, FL 328087560 US

New Mailing Address:

FEI Number: 84-1631505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUEGER, JAMES N
320 GOLF BROOK CIRCLE
#208
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

KRUEGER, JAMES N
612 N. HUDSON STREET
ORLANDO, FL 328087560 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:

07/21/2008

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: PSTD () Delete
Name: KRUEGER, JAMES N
Address: 320 GOLF BROOK CIRCLE
City-St-Zip: LONGWOOD, FL 327796138

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: KRUEGER, JAMES N
Address: 612 N. HUDSON STREET
City-St-Zip: ORLANDO, FL 328087560 US

Title: VP1D () Change (X) Addition
Name: KRUEGER, GERALD P
Address: 612 N. HUDSON STREET
City-St-Zip: ORLANDO, FL 328087560 US

Title: VP2 () Change (X) Addition
Name: SHAHINIAN, PATRICIA A
Address: 612 N. HUDSON STREET
City-St-Zip: ORLANDO, FL 328087560 US

Title: VPO () Change (X) Addition
Name: COLEMAN, JOANNE M
Address: 612 N. HUDSON STREET
City-St-Zip: ORLANDO, FL 328087560 US

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: JAMES N. KRUEGER

P

07/21/2008

Electronic Signature of Signing Officer or Director

Date