

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000008450

Entity Name: SSMF INC.

FILED
Nov 16, 2006
Secretary of State

Current Principal Place of Business:

5025 NORTH HIATUS ROAD
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

5025 NORTH HIATUS ROAD
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 56-2430315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUMAN, AVI
5025 NORTH HIATUS ROAD
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

ZWIEBEL, ERIC ESQ
8751 W. BROWARD BLVD.
SUITE 100
PLANTATION, FL 33324 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: ERIC ZWIEBEL

11/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOUMAN, AVI
Address: 5025 NORTH HIATUS ROAD
City-St-Zip: SUNRISE, FL 33351

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: HAREL, NIR
Address: 5025 NORTH HIATUS ROAD
City-St-Zip: SUNRISE, FL 33351

Title: VP/T () Change (X) Addition
Name: DOLINKO, MICHAEL
Address: 5025 NORTH HIATUS ROAD
City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the 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: NIR HAREL/ MICHAEL DOLINKO

P/V/P

11/16/2006

Electronic Signature of Signing Officer or Director

Date