## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 07, 2005 8:00 am Secretary of State

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DOCUMENT # P04000133383  1. Entity Name SMARTPLUS CONTRACTORS INC.						05-17-20	-	042 **	**150.00
Principal Place	a of Business	Mailing Address			ĺ	0006	1400		
10033 BELLV		10033 BELLWOOD CT		ļ		-			
ORLANDO, FL		ORLANDO, FL 32821			ĺ				
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2. Principal Place of Business 3. Mailing Address		٠١	cf.						
100 33 Bellwood Ct		10033 Bellwo	Suite, Apt. #, etc.						
Suite, Apt. *, etc.		dute, opti zi divi	dute, ripti vi ete.		04272005	Chg-P	CR2E034	(10/03)	
City & State	<u> </u>	City & State	City & State		4, FEI Number			ПАр	plied For
Orlando, FL		Orlando FL			651	<u> 233171</u>		No	t Applicable
Zip	Country	Zip Country			5. Certificate of	Statue Castred		.75 Add	
32809 lorange		32821			<u> </u>		Fee	Require	
6. Name and Address of Current Registered Agent					7. Name and A	ddress of New Re	gistered Age	nt	
- Collings			.   '	Name	·				
	FILINGS INC			Street Address (P.O. Box Number is Not Acceptable)					
660 E JEFFERSON STREET TALLAHASSEE, FL 32301				The state of the s					
I F Norther 11 to 14	- 0								
	A.		}-	City		·		Zip Code	
				<u> </u>			FL		
	named entity submits this statement to lons of registered agent.	or the purpose of changing its	registered	office or register	ed agent, or both,	in the State of Flor	ida. I am fami	itiar with.	and accept
nia Aniiāen	ors of registered agent.	4					_		
SIGNATURE	Char or					O!	<u>5-09-</u>	<u>05</u>	
	Signature, typed or printed name of registered agent	and the illepplicable. (NOTE	2 Registered Ap	Gent signature required	when rainstating)	·	DATE		
		9. Election Campaig	ino Financi	ino <b>\$</b> 5	.00 May Be	<del>_</del>			
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.				ed to Fees				ļ
					ASSET STATE OF THE	TO OFFI	COO AND DE		- 41 44
10.	OFFICERS AND		11.	····	ADDITIONS/CI	HANGES TO OFFIC			
TILL	· · -	☐ Oelete	TITLE	i			u	] Change	☐ Addition
HAME STREET ADDRESS	MARTINEZ, FRANCISCO 10033 BELLWOOD CT		NAME	ADDRESS					
CITY-ST-ZP	ORLANDO, FL 32821		CULY-21						
TITLE	ST SECTION OF THE SEC	☐ Delete						1 Change	- Addition
HAME	MARTINEZ, YESENIA	LI VEXE	TITLE NAME					] Change	☐ Addition
STREET ADDRESS	10033 BELLWOOD CT			ADDRESS					
CITY-ST-ZIP	ORLANDO, FL 32821		CITY-ST						
TITLE	0.000,12 0202	☐ Deleta						1 Change	☐ Addition
NAME	•	L. Veicas	TITLE					Change	L. Addition
STREET ADDRESS	ĺ			ADDRESS					
CITY-ST-ZIP		_	CITY-ST	1				_	
TITLE	<del></del>	☐ Delete	TITLE			· <del></del>		Change	Addition
NAME	1		NAME				1-4	) Committee	T
STREET ADDRESS	1			ADDRESS					
CITY-ST-ZIP	ĺ		CITY-ST						
TITLE		☐ Delete	TITLE	-				Change	Addition
HAME	1	,	NAME				_	,	
STREET ADDRESS	1		•	ADDRESS					
CITY-ST-ZIP	1		CITY-ST	1-ZIP					
TITLE		☐ Delete	TITLE					Change	☐ Addition
NAME			HAME				_		
STREET ADDRESS	1		R	ADDRESS					
CITY-ST-ZIP	1		CITY-ST						
12. I hereby (	certify that the information supplied wit	th this filing does not qualify for	r the exemt	otion stated in Se	ction 119.07(3)(i),	Fiorida Statutes, I	further certify t	that the ir	ntormation
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report of 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									
of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my hame appears in Block 10 of Block 11 (rechanged, or on an attachment with an address, without other like empowered.									
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CLONIAT	rine. ( <i>if</i>								