

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 02, 2008 8:00 am**  
**Secretary of State**

06-02-2008 90002 020 \*\*\*150.00

DOCUMENT # P05000002251

1. Entity Name  
S-MART CORP.



Principal Place of Business Mailing Address  
~~27455 S DIKE HWY~~ 8743 NW 167 ST. 8743 NW 167 STREET  
~~KIOSK #295 MIAMI LAKES, FL~~ MIAMI LAKES, FL 33018  
~~NARANJA, FL 33032~~ 33018

40106981



02212008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 26-0101569 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SILVERIO, RAMON D  
8743 N.W. 167 STREET  
MIAMI LAKES, FL 33018

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE P  
NAME SILVERIO, RAMON D  
STREET ADDRESS 8743 N.W. 167 STREET  
CITY - ST - ZIP MIAMI LAKES, FL 33018

TITLE ST  
NAME SILVERIO, ANA J  
STREET ADDRESS 8743 N.W. 167 STREET  
CITY - ST - ZIP MIAMI LAKES, FL 33018

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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

Date

Daytime Phone #

2-21-08 305/891-0880

ATTACHMENT

40106981

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## 2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**\*\* The document number, business name and file date cannot be changed on the report. \*\***

Document Number P05000002251

Business Entity Name S-MART CORP.

Original File Date 01/05/2005

FEI Number 26-0101569

Principal Address ~~27465 G DIXIE HWY~~ 8743 NW 167 Street  
~~KIOSK #295~~ Miami Lakes FL 33018  
~~NARANJA, FL 33032~~

Mailing Address 8743 NW 167 STREET  
MIAMI LAKES, FL 33018

Registered Agent RAMON D SILVERIO  
8743 N.W. 167 STREET  
MIAMI LAKES, FL 33018 US

### Officer/Director Name And Address

P  
RAMON D SILVERIO  
8743 N.W. 167 STREET  
MIAMI LAKES, FL 33018

ST  
ANA J SILVERIO  
8743 N.W. 167 STREET  
MIAMI LAKES, FL 33018

If all of the above  
information is correct and  
you do not wish to make  
any changes, please  
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