

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000022973

FILED  
May 01, 2008  
Secretary of State

Entity Name: VENUE SMART CORPORATION

**Current Principal Place of Business:**

66 PINE FOREST DR  
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

66 PINE FOREST DR  
HAINES CITY, FL 33844

**New Mailing Address:**

FEI Number: 01-0872359

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOENS, ROBERT  
66 PINE FOREST DR  
HAINES CITY, FL 33844 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

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: V ( ) Delete  
Name: JOENS, ROBERT  
Address: 66 PINE FOREEST DR  
City-St-Zip: HAINES CITY, FL 33844

Title: V ( ) Delete  
Name: ACEVEDO, ERIC  
Address: 75 BATTLER ST  
City-St-Zip: ORLANDO, FL 32828

Title: V ( ) Delete  
Name: MAZZELLA, ROCCO  
Address: 322 CASSIA DR  
City-St-Zip: DAVENPORT, FL 33897

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROCCO MAZZELLA

VP

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date