

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025813

FILED  
Jul 11, 2008  
Secretary of State

Entity Name: \$SMART CENTS, INC.

**Current Principal Place of Business:**

27000 SOUTH DIXIE HWY  
NARANJA, FL 33032

**New Principal Place of Business:**

**Current Mailing Address:**

27000 SOUTH DIXIE HWY  
NARANJA, FL 33032

**New Mailing Address:**

FEI Number: 61-1474482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIPRIANI, CHOYLAN  
27000 SOUTH DIXIE HWY  
NARANJA, FL 33032 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: P ( ) Delete  
Name: CIPRIANI, CHOYLAN  
Address: 27000 SOUTH DIXIE HWY  
City-St-Zip: NARANJA, FL 33032

Title: V ( ) Delete  
Name: CIPRIANI, KESA  
Address: 27000 SOUTH DIXIE HWY  
City-St-Zip: NARANJA, FL 33032

Title: ST ( ) Delete  
Name: CIPRIANI, GABRIEL JR  
Address: 27000 SOUTH DIXIE HWY  
City-St-Zip: NARANJA, FL 33032

**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: CHOYLAN CIPRIANI

PRES

07/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date