## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000043696

Entity Name: SMCY, INC.

FILED Mar 02, 2009 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

2260 WEST 80TH STREET 10760 NORTHWEST 138TH STREET

BAY 1 BAY 5

HIALEAH, FL 33016 HIALEAH, FL 33018 US

Current Mailing Address: New Mailing Address:

%IVAN A. GOMEZ, ESQ.

601 BRICKELL KEY DRIVE, SUITE 507 601 BRICKELL KEY DRIVE, SUITE 507

MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 20-2760398 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

IAG CORPORATE SERVICES, INC. 601 BRICKELL KEY DR SUITE 507 MIAMI, FL 33131 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PD () Delete Title: PD (X) Change () Addition

Name: ACOSTA, TIMOTHY Name: ACOSTA, TIMOTHY

Address: 2260 WEST 80TH STREET, BAY 1 Address: 10760 NORTHWEST 138TH STREET, BAY #5

City-St-Zip: HIALEAH, FL 33016 City-St-Zip: HIALEAH, FL 33018 US

Title: ST ( ) Delete Title: ST (X) Change ( ) Addition

Name: ACOSTA, YOLEXYS Name: ACOSTA, YOLEXYS

Address: 2260 WEST 80TH STREET, BAY 1 Address: 10760 NORTHWEST 138TH STREET, BAY #5

City-St-Zip: HIALEAH, FL 33016 City-St-Zip: HIALEAH, FL 33018 US

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: TIMOTHY ACOSTA P 03/02/2009