## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 11, 2007 08:00 A Secretary of State **DOCUMENT # P05000084636** 1. Entity Name SMP PROPERTY INC. Principal Place of Business Mailing Address 5107 N.W. 58TH TERRACE 5107 N.W. 58TH TERRACE CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 01052007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 87-0748080 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 5. Name and Address of Current Registered Agent WRIGHT, ROBERT E DO NOT WRITE 5151 N.E. 18TH TERRACE FT. LAUDERDALE, FL 33308 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) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITIF NAME FRANCO, SAMUEL STREET ADDRESS **5107 N.W. 58TH TERRACE** CITY-ST-7IP CORAL SPRINGS, FL 33067 TITLE U00000699323 AZOALOS, MOSHE -04/19/07-80038-003 150.do 5107 N.W. 58TH TERRACE STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33067 VP LICATE, PAULO NAME STREET ADDRESS 5107 N.W. 58TH TERRACE DO NOT WRITE CITY-ST-ZIP CORAL SPRINGS, FL 33067 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP ĦΠĿ

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 appears in Block 10 or Block 11 if

ED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

Namuel provo

SAMUEL FRANCO

4/9/07 9/4-771-4850

Data

Daytime Phone #

**FILED**