2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# P06000007872

Entity Name: SMOTHERS ENTERPRISES, INC.

Current Principal Place of Business:

6881 SIMMS STREET
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

3349 N UNIVERSITY DR
#5
HOLLYWOOD, FL 33024 US

Current Mailing Address:

6881 SIMMS STREET
HOLLYWOOD, FL 33024 US

New Mailing Address:

3349 N UNIVERSITY DR
#5
HOLLYWOOD, FL 33024 US

FEI Number: 20-4111778 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMOTHERS, LISA
6881 SIMMS STREET
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC
813 DELTONA BLVD STE A
BOX 1376958
DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC 01/15/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMOTHERS, LISA
Address: 6881 SIMM STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP ( ) Delete
Name: SMOTHERS, MICHAEL J
Address: 6881 SIMMS STREET
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMOTHERS, LISA
Address: 3349 N UNIVERSITY DR #5
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP (X) Change ( ) Addition
Name: SMOTHERS, MICHAEL J
Address: 3349 N UNIVERSITY DR #5
City-St-Zip: HOLLYWOOD, FL 33024

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: CHRISTINA CLARK FOR LISA SMOTHERS P 01/15/2009
Electronic Signature of Signing Officer or Director Date