

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000112800

Entity Name: SMART PROCESSING SOLUTIONS, INC.

FILED  
Jun 06, 2007  
Secretary of State

## Current Principal Place of Business:

1477 NW 124 AVE  
PEMBROKE PINES, FL 33026

## New Principal Place of Business:

1800 W 49 STREET  
218  
HIALEAH, FL 33012

## Current Mailing Address:

1477 NW 124 AVE  
PEMBROKE PINES, FL 33026

## New Mailing Address:

1800 W 49 STREET  
218  
HIALEAH, FL 33012

FEI Number: 26-0305452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRIS, SCOTT P  
1477 NW 124 AVE  
PEMBROKE PINES, FL 33026 US

## Name and Address of New Registered Agent:

LOBATO, SAMARA  
1800 W 49 STREET  
218  
HIALEAH, FL 33012 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: SAMARA LOBATO

06/06/2007

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: PD ( ) Delete  
Name: FERIA, MARTA  
Address: P. O. BOX 22651  
City-St-Zip: HIALEAH, FL 33002

Title: VPD ( ) Delete  
Name: LOBATO, SAMARA  
Address: P. O. BOX 22651  
City-St-Zip: HIALEAH, FL 33002

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SAMARA LOBATO

VPD

06/06/2007

Electronic Signature of Signing Officer or Director

Date