2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120541

Entity Name: SMADA INCORPORATED, INC.

FILED Feb 21, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2006 ORAI FORT PIEI	NGE AVE RCE, FL 3495	0					
Current Mailing Address:				New Mailing Address:			
2006 ORAI FORT PIE	NGE AVE RCE, FL 3495	0					
FEI Number:	20-8051799	FEI Number Applied For ()	FEI Num	ber Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:		Name and	Address of N	ew Registered Agent:	
A1A REGISTERED AGENT INC. 92 SADBERRY RD QUINCY, FL 32351 US				ADAMS, KENNETH D 2006 ORANGE AVENUE FORT PIERCE, FL 34950 US			
	named entity see of Florida.	submits this statement for the p	urpose of	changing it	ts registered of	ffice or registered agent, or both,	
SIGNATUR	RE: KENNET	H ADAMS				02/21/2007	
	Electror	nic Signature of Registered Age	nt			Date	
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:		ADDITION	S/CHANGES	TO OFFICERS AND DIRECTOR	5:
Title: Name: Address: City-St-Zip:	DP () ADAMS, KENNI PO BOX 2849 FT PIERCE, FL			Title: Name: Address: City-St-Zip:	PSD (X) ADAMS, KENNE PO BOX 2849 FT PIERCE, FL		
Title: Name: Address: City-St-Zip:	D (X WILLIAMS, EM PO BOX 2849 FT PIERCE, FL			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	V () ADAMS, ELANI PO BOX 2849 FT PIERCE, FL			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DS (X ADAMS, CHER PO BOX 2849 FT PIERCE, FL			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	T (X BIRKS, RASHIE PO BOX 2849 FT PIERCE, FL			Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: KENNETH ADAMS P 02/21/2007