


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # P93000000033	
1. Entity Name SMITTY'S STANDARD TRANSMISSION PARTS, INC.	

Principal Place of Business 4701 SW 83 TERR DAVIE, FL 33328	Mailing Address 4701 SW 83 TERR DAVIE, FL 33328
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DO NOT WRITE IN THIS SPACE



03272008 , No Chg-P CR2E034 (11/05)

4. FEI Number 65-0377933	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SMITH, WILLIAM SR.
4832 SW 44 TERR
FT LAUDERDALE, FL 33314

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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: William C Smith DATE: 3/26/08

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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000874830 04/11/08-80008-009 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, WILLIAM C SR. 4832 SW 44TH TERRACE FT. LAUDERDALE, FL 33314
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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 an address, with all other like empowered.

SIGNATURE: William C Smith DATE: 3/26/08 DAYTIME PHONE #: 954-434-2059

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR