Mar 11, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## 1999 DIV

DOCUMENT # P93000012327

1. Corporation Name

S.M.P. INVESTMENTS, INC

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Principal Place	of Business	Mailir	ng Address				ן יי	ABIIDD IIA ISIAN 11111	<b>00</b> 131 <b>00</b> 111 <b>0</b> 4	1147 <b>98</b> (87 ((	********	1112 11011	
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2. Principal P	lace of Business	2a. M	lailing Address			<del></del>	4. FEI Nu					Applied	For
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	EVE ST				82	Street Addr	ress (P.O. Bo)	Number is Not	Acceptable	)			
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11. Pursuant	to the provisions of Sections 607	0502 and 607	.1508, Florida Statu	ites, the ab	ove-	named corp	poration submi	ts this statement	for the pur	pose of o	hanging	its reg	stered
office or r	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the ol	itate of Florida.	Such change was a	authorized	OV U	he corporation	ion's board of	directors. I hereb	y accept th	ie appoin	tment as	regist	erea
1	III lamiliai with, and accept the or	bligations of, or	001.0000, 11.										
SIGNATURE	Signature, typed or printed name of registere	ad agent and title if ap	oplicable (NOT	E: Registered	Agent :	signature require	ed when reinstating)			DATE			
12.	OFFICER	S AND DIRECT		13.			ADDITI	ONS/CHANGES	TO OFFIC	ERS AN	DIREC	TORS	IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/99 56

561/276-0043

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