

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
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95 MAY 16 AM 8:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra J. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P94000066692 (2)**

1. Corporation Name  
**CHARLES SMITH ASSOCIATES, INC.**

Principal Place of Business Mailing Address  
**918 NE 92ND ST MIAMI SHORES FL 33161**      **918 NE 92ND ST MIAMI SHORES FL 33161**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Certified <b>09/12/1994</b>		3b. Date of Last Report	
4. FEI Number <b>65-0520616</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
8. This corporation has in Florida Statutes <input checked="" type="checkbox"/> No		intangible tax under S. 199.037	

2. Principal Place of Business				2a. Mailing Address			
21	Suite, Apt. #, etc.			26	Suite, Apt. #, etc.		
22	City & State			27	City & State		
23	Zip	Country		28	Zip	Country	
24	25	29	30	B. Name and Address of Current Registered Agent			
				10. Name and Address of new Registered Agent			
<b>FERNANDEZ, RICHARD M ESQ 11077 BISCAYNE BLVD PENTHOUSE SUITE MIAMI FL 33161</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with the provisions of Sections 607.0502, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SMITH, CHARLES</b>	1.2 NAME	
STREET ADDRESS	<b>918 NE 92ND ST</b>	1.3 STREET ADDRESS	
CITY & STATE	<b>MIAMI SHORES FL 33161</b>	1.4 CITY & STATE	
2.1 TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		2.2 NAME	
2.3 STREET ADDRESS		2.3 STREET ADDRESS	
2.4 CITY & STATE		2.4 CITY & STATE	
3.1 TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		3.2 NAME	
3.3 STREET ADDRESS		3.3 STREET ADDRESS	
3.4 CITY & STATE		3.4 CITY & STATE	
4.1 TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY & STATE		4.4 CITY & STATE	
5.1 TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY & STATE		5.4 CITY & STATE	
6.1 TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY & STATE		6.4 CITY & STATE	

14. I hereby certify that the information supplied with this filing voluntarily furnished and does not qualify for the exemption stated in Section 199.07(1)(b), 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 its authorized representative to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of this form or on an attached board of directors resolution.

SIGNATURE: *Charles W. Smith*      **Charles W. Smith**      5/12/95      (305) 758-9451