## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P95000044373 (5)

SMITH MARKETING GROUP, INC.

**FILED** May 04 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					- I HEBITABU (IN UNINI NINI BBITI NKITI ABITI NKITI BENIT NLIBU ALBAN KITI KANDA KITI HEBIT	
84001	19TH ST. #1707	529/ 100	TH /	3 U		
PINELL	e of Business 49TH ST. #1707 93 PARK, FL.	5291 100 PINELLAS	PARK	, FL.		E IN THIS SPACE
3378	4	33782			3. Date Incorporated or Qualified	
					05/30/1995	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
	YATH ST.		00 TH	AVE	59-3314800	Not Applicable
Suite, Apt.	#, etc. ノフゥフ	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 23 PINE	LLAS PARK, FL.	City & State 28 PINELLAS	PAR	K, Fl.	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country		Country	*	I & This corporation owes or has n.	
24 <b>33</b> 7		29 33782	30 /21/	YELLAS	Personal Property Tax due June	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
SMITH, DAN						
10225 ULMERTON ROAD SUITE 12B 82 Street Add				ess (P.O. Box Number is Not Accepta	ble)	
LARGO FL 34641					· · · · · · · · · · · · · · · · · · ·	
			83			
			84	City		FL 85 Zip Code
office or r		of Florida Such change was a ions of, Section 607.0505, Flo	authorized by orida Statutes	the corporati	ion's board of directors. I hereby acce	pt the appointment as registered
<del></del>	Signature, typed or prison nan-e of negistered agent			int signature require	ed when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
TITLE	PST			-		☐ Change ☐ Addition
NAME	SMITH, DAN		1.2 NAME			
STREET ADDRESS	5291 100 AVE NORTH		1.3 STREET			
CITY-ST-ZIP	PINELLAS PARK FL 34666	DELETE	1.4 CITY-ST-ZIP			Observe The Astronomy
TITLE .	☐ DEL ETÉ		2.1 TITLE	1		Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET			
CITY-ST-ZIP TITLE			2.4 CITY-5	ST - Z(P		Change Addition
•	<b>_</b>		3.1 TITL€	1		LI Change LI Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	1		
CITY-ST-ZIP		[] DELETE	3.4. CITY-5	ST - 21P		Change
TITLE		L_J DELFTE	4.1 TITLE	ļ		Change Addition

CITY-ST-ZIP 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 ( ch

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

5.1 1/1LE

52 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

NAME

Change

■ Addition

Addition