

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State
 05-02-2002 90122 011 ***150.00

DOCUMENT # P95000052052

1. Entity Name

SMARTECH INTERNATIONAL CORP.

Principal Place of Business

**245 SE 1ST STREET SUITE 321
 MIAMI FL 33131**

Mailing Address

**245 SE 1ST STREET SUITE 321
 MIAMI FL 33131**

80084333



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

245 SE. 1ST STREET

3. Mailing Address

245 SE. 1ST STREET

Suite, Apt. #, etc.

SUITE # 323

Suite, Apt. #, etc.

SUITE # 323

City & State

MIAMI - FL

City & State

MIAMI - FL

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

65-0592838

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRYANT, BERNARD H

847 NW 119 STREET STE #205

MIAMI FL 33168

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PTS** ☐ Delete
 NAME **MARTINS CARNEIRO, LUCIANO A**
 STREET ADDRESS **245 SE 1ST STREET STE #321**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LUCIANO A. MARTINS CARNEIRO (305) 377-4535

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/18/02**

Daytime Phone #

CR2E034 (9/01)