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Feb 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000074085 (8)

1. Corporation Name  
SMALL BUSINESS MATTERS, INC.



Principal Place of Business  
2835 TIGERTAIL AVE., #401  
MIAMI FL 33133

Mailing Address  
P O BOX 331430  
MIAMI FL 33233-1430  
US

3. Date Incorporated or Qualified 09/25/1995  
3a. Date of Last Report 06/28/1996

2. Principal Place of Business  
21 78 ROWAYTON WOODS DR.  
Suite, Apt. #, etc.  
22 NORWALK, CT  
City & State  
23 06854-3908  
Zip Country  
24 25 29 30

4. FEI Number 65-0611836  
Applied For Not Applicable  
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
CULLEY, THOMAS W  
2835 TIGERTAIL AVE., #401  
MIAMI FL 33133

10. Name and Address of New Registered Agent  
81 Name CULLEY, THOMAS W.  
82 Street Address (P.O. Box Number is Not Acceptable) 1207 MERIDIAN AVE. #9  
83  
84 City MIAMI BEACH FL 85 Zip Code 33139

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, or both, 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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Thomas W. Culley* THOMAS W. CULLEY, VICE-PRESIDENT 1/28/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE D  
NAME CULLEY, THOMAS W  
STREET ADDRESS 2835 TIGERTAIL AVE., #401  
CITY-ST-ZIP MIAMI FL 33133  
TITLE D  
NAME LYON, KEITH  
STREET ADDRESS 17 VALLWY ROAD WILSON POINT  
CITY-ST-ZIP NORWALK CT 06854  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE VICE-PRESIDENT ☒ Change ☐ Addition  
1.2 NAME CULLEY, THOMAS W.  
1.3 STREET ADDRESS 1207 MERIDIAN AVE. #9  
1.4 CITY-ST-ZIP MIAMI BEACH, FL 33139  
2.1 TITLE PRESIDENT ☒ Change ☐ Addition  
2.2 NAME LYON, KEITH  
2.3 STREET ADDRESS 17 VALLEY RD, WILSON POINT  
2.4 CITY-ST-ZIP NORWALK, CT 06854  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 in an attachment with an address.

SIGNATURE: *Thomas W. Culley* THOMAS W. CULLEY, VICE-PRESIDENT 1/28/97  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)