## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000064400

Entity Name: SMART TIME CORP.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5555 ANGLERS AVE SUITE 19

FORT LAUDERDALE, FL 33312

Current Mailing Address: New Mailing Address:

5555 ANGLERS AVE SUITE 19

FORT LAUDERDALE, FL 33312

FEI Number: 65-0683121 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHNITZER, MEIR
5555 ANGLERS AVE 19
SHNITZER, SHMUEL M P
5555 ANGLERS AVE 19

FORT LAUDERDALE, FL 33312 US FORT LAUDERDALE, FL 33312 US

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: SHMUEL M SHNITZER 04/20/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition Name: SHNITZER, MEIR Name: SHNITZER, SHMUEL M PSD 5555 ANGLERS AVE SUITE 19 5555 ANGLERS AVE SUITE 19 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VTD ( ) Delete Title: VTD (X) Change ( ) Addition

Name: FURMAN, MARIO Name: FURMAN, MARIO V

Address: 5555 ANGLERS AVE SUITE 19 Address: 5555 ANGLERS AVE SUITE 19
City-St-Zip: FORT LAUDERDALE, FL 33312 City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHMUEL M SHNITZER P 04/20/2006