

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

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000076052 (4)**

1. Corporation Name

S & M INVESTMENT AND FINANCE INC.



Principal Place of Business 680 CYPRESS CLUB WAY H POMPANO BEACH FL 33064 9280 KETAY CIRCLE BOCA RATON, FL 33428	Mailing Address 680 CYPRESS CLUB WAY H POMPANO BEACH FL 33064 9280 KETAY CIRCLE BOCA RATON, FL 33428
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/02/1997	
21 9280 KETAY CIRCLE	26 9280 KETAY CIRCLE	4. FEI Number 65-0773220		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State 23 BOCA RATON, FL.		City & State 28 BOCA RATON		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Zip 33428	Country PALM BCH	Zip 33428	Country PALM BCH		
24 BOCA RATON	25 BOCA RATON	29 33428	30 PALM BCH		

9. Name and Address of Current Registered Agent CLAMENS, WINFIELD P JR. 680 CYPRESS CLUB WAY H POMPANO BEACH FL 33064		10. Name and Address of New Registered Agent	
		81 Name CLAMENS, WINFIELD P JR.	
		82 Street Address (P.O. Box Number is Not Acceptable) 9280 KETAY CIRCLE	
		83	
		84 City BOCA RATON	
		85 Zip Code FL 33428	

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

(Signature) **(Address Change Only)**

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEO, President <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINFIELD E CLAMENS (SR)	1.2 NAME	
STREET ADDRESS	9280 KETAY CIR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL. 33428	1.4 CITY-ST-ZIP	
TITLE	DIRECTOR and Executive Secretary <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANN CLAMENS	2.2 NAME	
STREET ADDRESS	9280 KETAY CIR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL. 33428	2.4 CITY-ST-ZIP	
TITLE	MANAGING DIRECTOR <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINFIELD P CLAMENS (SR)	3.2 NAME	
STREET ADDRESS	9280 KETAY CIR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL. 33428	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 if changed. On an attachment with an address.

SIGNATURE

CR2E034 (10/97)