## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P97000077303**

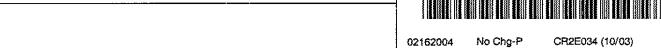
SMART FINANCE, INC.



**FILED** Feb 28, 2004 08:00 AM Secretary of State

Principal Place of Business

3100 CLAY ST SUITE 275 ORLANDO, FL 32804 Mailing Address 3100 CLAY ST SUITE 275 ORLANDO, FL 32804



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

		**	
	59-3467827		Not Applicable
4,	FEI Number		Applied For

5. Certificate of Status Desired

02162004

\$8.75 Additional Fee Required

CR2E034 (10/03)

KRAMER, STUART A 3100 CLAY ST SUITE 275

## DO NOT WRITE IN THIS SPACE

OREANDO, FE 32004				III IIIO OI AOL		
	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	d office or r	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title it	f applicable (NOYE. Registered	Agent signatur	e required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			3	
NAME STREET ADDRESS CITY-ST-ZIP	DVST KRAMER, STUART A 3100 CLAY ST SUITE 275 ORLANDO, FL 32804		U00000071707			
RITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HAMNER, DWAYNE R 3100 CLAY ST SUITE 275 ORLANDO, FL 32804		03/01/04-80081-024 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KRAMER, SUMNER 3100 CLAY ST SUITE 275 ORLANDO, FL 32804			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. 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 supplier first 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stuart Kramer

2/27/2004

(407)896-9059