


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90103 028 \*\*\*150.00

<b>DOCUMENT # P97000095772</b> 1. Entity Name <b>RISE SMART DEVELOPMENT, INC.</b>			
Principal Place of Business <b>C/O DIETER A THIEMANN</b> <b>11380 PROSPERITY FARMS RD #110A</b> <b>PALM BEACH GDNS, FL 33410</b>		Mailing Address <b>C/O DIETER A THIEMANN</b> <b>11380 PROSPERITY FARMS RD #110A</b> <b>PALM BEACH GDNS, FL 33410</b>	
2. Principal Place of Business - No P.O. Box # <b>11380 PROSPERITY FARMS RD</b> Suite, Apt. #, etc. <b>SUITE 215</b>		3. Mailing Address <b>11380 PROSPERITY FARMS RD</b> Suite, Apt. #, etc. <b>SUITE 215</b>	
City & State <b>PALM BEACH GARDENS FL</b>		City & State <b>PALM BEACH GARDENS, FL</b>	
Zip <b>33410</b>	Country <b>USA</b>	Zip <b>33410</b>	Country <b>USA</b>
4. FEI Number <b>65-0792157</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		02282007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent  <b>THIEMANN, DIETER A</b> <b>C/O DIETER A THIEMANN</b> <b>11380 PROSPERITY FARMS RD., STE. 110 A</b> <b>PALM BEACH GDNS, FL 33410</b>		7. Name and Address of New Registered Agent Name <b>THIEMANN, DIETER A.</b> Street Address (P.O. Box Number is Not Acceptable) <b>11380 PROSPERITY FARMS RD. STE 215</b> City <b>PALM BEACH GARDENS FL</b> Zip Code <b>33410</b>	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>THIEMANN, DIETER A</b> <input type="checkbox"/> Delete <b>11380 PROSPERITY FARMS RD #110A</b> <b>PALM BEACH GDNS, FL 33410</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>THIEMANN, DIETER A</b> <b>11380 PROSPERITY FARMS RD. STE 215</b> <b>PALM BEACH GARDENS FL 33410</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.			
SIGNATURE: <u>DIETER A. THIEMANN</u> <u>DIR</u> <u>3/1/07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			