# 6529 FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # **P98000061079**1. Corporation Name

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 15, 1999 8:00 am Secretary of State 04-15-1999 90065 007 \*\*\*150.00

SMC FLORIDA HOLDINGS, INC.		
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Principal Place	of Business	Mailing Address			, 100,110,110				
90 N. ORANGE	AVENUE	390 N. ORANGE AVENUE							
SUITE 1225	225 SUITE 1225								
DRLANDO FL 3	PLANDO FL 32801 ORLANDO FL 32801					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporate 07/09/1998	d or Qualifed			l
								aliad Cas	1
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	plied For	l
1		26			59.35229	3.2	<del> </del>	t Applicable	l
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Stat	us Desired 🔲	<b>\$8.75</b> A Fee Re		l
2		City & State	<del></del> -		5 Floring Compai	<u></u>	\$5.00		
City & Stat	e	<b>⊢</b> ¬ ′			6. Election Campai  Trust Fund Contr	- 11	Added to	•	J
3	Country		Cou	ntry		owes the current year Int			į
Zip	25	29	30	,	Personal Propert		Yes	MNo	l
4	9. Name and Address of Currer		1301			ess of New Registered			l
	J. Halle and Modes of Garter	it itogicalite i igen		81 Name	<i>(</i> * 1	( 1			l
B&C	CORPORATES SERVICES OF C	ENTRAL FLA INC			Gregory A.	15040x			l
390	n. Orange avenue			82 Street A	ddress (P.O. Box Number i	71 . 6	•		l
SUIT	E 1225			83	90 Di Orang	710-1	<del></del>		l
ORL	ANDO FL 32801			<u> </u>	site 1225				
				84 City	Orla da	FL	85 Zip C 3 2-1		ĺ
44 5	to the provisions of Sections 607.050	2 and 607 1509 Florida Statu	tor the a	hove-named o	cornoration submits this etat				
office or r	egistered agent, or both, in the State	of Florida. Such change was a	authorized	by the corpo	ration's board of directors. I	hereby accept the appoint	ntment as reg	gistered	
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Fit	onda Stati	utes.	10 1	11-10	a		
SIGNATURE	Signature, types for printed name of registered age:	d Vice Preside	Registered	Coregor	y H. Boyd J dured when reinstating)	DATE	<del>1</del>	<del></del> :	ہ ا
12.		ID DIRECTORS	13.	Agent agriculto to		NGES TO OFFICERS AN	ID DIRECTO	RS IN 12	Ş
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NAME	BRIGHT, TIMOTHY P		1.2 N	ME					1 2
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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, or on an attackment with an address, with all other like empowered.

SIGNATURE: