## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000061079

Entity Name: SMC FLORIDA HOLDINGS, INC.

FILED Feb 16, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
SUITE 300	DRAS STREET DPLAZA LEANS, LA 70°					
Current Mailing Address:			New Mailing Address:			
SUITE 300	ORAS STREET O PLAZA LEANS, LA 70°					
FEI Number	: 59-3522955	FEI Number Applied For ( )	FEI Number Not App	icable ( )	Certificate of Status Desired (	)
Name and	d Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
1989 PLE/	EN, SEAN ASANT DRIVE 'ALM BEACH, I	FL 33408 US				
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	l office or registered agent, or l	ooth,
SIGNATU	RE:					
	Electror	nic Signature of Registered Age	ent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	BRIGHT, TIMO 701 POYDRAS		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BRIGHT, EDGE 701 POYDRAS		Title: Name: Address: City-St-Zip:	BRIGHT, ED 701 POYDRA		
Title: Name: Address: City-St-Zip:	LUCCIONI, CA <sup>2</sup> 701 POYDRAS	) Delete IHERINE ST #300 PLAZA S, LA 701390300	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	( )	) Delete	Title: Name: Address: City-St-Zip:	KELLY, TIMO 701 POYDRA	( ) Change (X) Addition DTHY E AS ST #300 PLAZA NS, LA 701390300	

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: TIMOTHY E KELLY VP 02/16/2007