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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P98000061382

SMC FLORIDA INVESTMENTS, INC.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90065 006 ***150.00

Principal Place of Business	Mailing Address				
390 NORTH ORANGE AVENUE	390 NORTH ORANGE AVENUE				
SUITE 1225	SUITE 1225				
ORLANDO FL 32801	ORLANDO FL 32801			E IN THIS SPACE	
			3. Date Incorporated or Qualifed		
			07/09/1998	T**T*.	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number		plied For
21	26		59-352295		t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	□ \$8.75 A Fee Re	
City & State	City & State	 2***	6. Election Campaign Financing	\$5.00	May Be
	28		Trust Fund Contribution	Added t	to Fees
Zip Country	Zip	Country	8. This corporation owes the curre		_
24 25	29 30	o <u>j</u>	Personal Property Tax.	☐ Yes	No
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Re	egistered Agent	
240 002202177 07711070 07	OFNITRAL ELODIDA	81 Name	regary A. Boyd		
B&C CORPORATE SERVICES OF	CENTRAL FLURIDA	82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)	
390 NORTH ORANGE AVENUE		39	O N. Drance Av	<u>e. </u>	
SUITE 1100		83 5	10 127		
ORLANDO FL 32801		84 City (C)	ite 1003	85 Zip (Code
·		84 City (*)	rlando		301
 Pursuant to the provisions of Sections 607. office or registered agent, or both, in the St agent. I am familiar with, and accept the ob- 	tate of Florida. Such change was auth bligations of, Section 607.0505, Florida	ionzea by the corporati	1 ^ \	ourpose of changing its the appointment as re	registered gistered
office or registered agent, or both, in the St agent. I am faciliar with, and accept the ob-	tate of Florida. Such change was autholigations of Section 607.0505, Florida Vice CSident	ionzea by the corporati	4 Soyd) ed when reinstating)	1/7/qq	gistored
office or registered agent, or both, in the St agent. I am facilitar with, and accept the ob-	tate of Florida. Such change was autholigations of Section 607.0505, Florida Vite resident	a Statutes.	4. Boyd)	DATE PICERS AND DIRECTO	DRS IN 12
office or registered agent, or both, in the St agent. I am familiar with, and accept the ob- SIGNATURE	tate of Florida. Such change was autholigations of, Section 607.0505, Floridation of the Communication of the Comm	a Statutes. Cregory agistered Agent signature require	4 Soyd) ed when reinstating)	1/7/qq	gistored
office or registered agent, or both, in the St agent. I am familiar with, and accept the ob- SIGNATURE Signature, typed or winted marke of registered 12. OFFICERS	tate of Florida. Such change was autri pligations of, Section 607.0505, Florida Communication of Section 607.0505, Florida agent and title if applicable. (NOTE: Re SAND DIRECTORS	onzed by the corporation a Statutes. Gregory agistered Agent signature require 13.	4 Soyd) ed when reinstating)	DATE PICERS AND DIRECTO	DRS IN 12
office or registered agent, or both, in the St agent. I am fagefliar with, and accept the ob- SIGNATURE Signature, typed or krinted frame of registered 12. OFFICERS TITLE D	tate of Florida. Such change was auri pligations of, Section 607.0505, Florida or agent and title if applicable. (NOTE: Re S AND DIRECTORS	a Statutes. CYCACA agistered Agent signature reduire 13. 1.1 TITLE	4 Soyd) ed when reinstating)	DATE PICERS AND DIRECTO	DRS IN 12
office or registered agent, or both, in the Stagent. I am faroffiar with, and accept the observation of signature, typed or winted frame of registered to the stagent of the observation	tate of Florida. Such change was auri pligations of, Section 607.0505, Florida or agent and title if applicable. (NOTE: Re S AND DIRECTORS	assistates. Cycacy agistered Agent signature require 13. 1.1 TITLE 1.2 NAME	4 Soyd) ed when reinstating)	DATE PICERS AND DIRECTO	DRS IN 12
office or registered agent, or both, in the Stagent. I am fappliar with, and accept the observation of signature, typed or krinted frame of registered process. 12. OFFICERS TITLE D NAME BRIGHT, TIMOTHY P STREET ADDRESS 390 NORTH ORANGE AVEN	tate of Florida. Such change was auri pligations of, Section 607.0505, Florida or agent and title if applicable. (NOTE: Re S AND DIRECTORS	a Statutes. GYESON agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	4 Soyd) ed when reinstating)	DATE PICERS AND DIRECTO	DRS IN 12
office or registered agent, or both, in the Stagent. I am faroffiar with, and accept the observation of the stagent. I am faroffiar with, and accept the observation of the stagent in the Stagent with an accept the observation of the stagent with a stagent with	tate of Florida. Such change was autri pligations of, Section 607.0505, Florida ogent and title if applicable. (NOTE: Re S AND DIRECTORS	a Statutes. GYEGOVA agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	ORS IN 12
office or registered agent, or both, in the Stagent. I am farming with, and accept the observation of the stagent. I am farming with, and accept the observation of the stagent in the Stagental of the observation of the stagent in t	tate of Florida. Such change was autri pligations of, Section 607.0505, Florida ogent and title if applicable. (NOTE: Re S AND DIRECTORS	a Statutes. GYEGOTALITA agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	ORS IN 12
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observation of the stagent of the observation of the stagent of the observation of the observat	tate of Florida. Such change was autri pligations of, Section 607.0505, Florida ogent and title if applicable. (NOTE: Re S AND DIRECTORS	agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	DRS IN 12 Addition
office or registered agent, or both, in the Stagent. I am farming with, and accept the observation of the stagent. I am farming with, and accept the observation of the stagent in the Stagental of the observation of the stagent in t	tate of Florida. Such change was autri pligations of, Section 607.0505, Florida ogent and title if applicable. (NOTE: Re S AND DIRECTORS	agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	ORS IN 12
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observation of the stagent. I am farafliar with, and accept the observation of the stagent with an accept the observation of the stagent with a stagent with	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida and Company of the Market Com	agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	DRS IN 12 Addition
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observation of the stagent. I am farafliar with, and accept the observation of the stagent in the	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida and Company of the Market Com	agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	DRS IN 12 Addition
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent, or both, in the Stagent agent, or both, in the Stagent, agent, or both, in the Stagent agent, or both, and or registered agent, or both, and accept the observed agent, or both agent, and or registered agent, or both agent, and or registered agent, or both, and or both agent, and or registered agent, and or both agent, and or registered agent, and or both agent, and or registered agent, and or both agent, a	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida and Company of the Market Com	agistered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	DRS IN 12 Addition
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observation of the stagent. I am farafliar with, and accept the observation of the stagent in the	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida and Company of the Market Com	agistered Agent signature reduire 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO	DRS IN 12 Addition
office or registered agent, or both, in the St agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent, or both, in the St agent agent agent, or both, in the St agent	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida application. (NOTE: Research and title if applicable. (NOTE: Research and title if applicable.) DELETE DELETE DELETE	agistered Agent signature reduire 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent, and in the Stagent agent, or both, in the Stagent, and in the Stagent agent, and in the Stagent agent, and in the Stagent agent, or both, in the Stagent, and in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, and accept the observed agent, or both, and or registered agent, or both, and or both agent, and or both agent agent, or both agent, and or both agent agent, and or both agent, and or b	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida application. (NOTE: Research and title if applicable. (NOTE: Research and title if applicable.) DELETE DELETE DELETE	agistered Agent signature reduire 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or registered agent, or both, in the St agent. I am farming with, and accept the observation of the stagent. I am farming a signature, typed or winted frame of registered to the stagent to the observation of the stagent to the observation of the stagent to the observation of the observation	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida application. (NOTE: Research and title if applicable. (NOTE: Research and title if applicable.) DELETE DELETE DELETE	as Statutes. CYPROPAUM as Statutes. CYPROPAUM as Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or registered agent, or both, in the Stagent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent. I am farafliar with, and accept the observed agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent, and in the Stagent agent, or both, in the Stagent, and in the Stagent agent, and in the Stagent agent, and in the Stagent agent, or both, in the Stagent, and in the Stagent agent, or both, in the Stagent agent, or both, in the Stagent agent, or both, and accept the observed agent, or both, and or registered agent, or both, and or both agent, and or both agent agent, or both agent, and or both agent agent, and or both agent, and or b	tate of Florida. Such change was autrinoligations of, Section, 607.0505, Florida application. (NOTE: Research and title if applicable. (NOTE: Research and title if applicable.) DELETE DELETE DELETE	as Statutes. CYCLONIA agistered Agent signature reduire 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	4 Soyd) ed when reinstating)	DATE CICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition

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, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

☐ Change

Addition