

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063911

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: SMI SPECIALTY MERCHANDISE, INC.

## Current Principal Place of Business:

16388 N.W. 88 TH PLACE  
MIAMI LAKES, FL 33018 US

## New Principal Place of Business:

## Current Mailing Address:

16388 NW 88TH PL  
MIAMI LAKES, FL 33018 US

## New Mailing Address:

FEI Number: 65-0860187      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, DAGOBERTO PRES  
16388 NW 88TH PL  
MIAMI LAKES, FL 33018 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MARTINEZ, DAGOBERTO  
Address: 16388 NW 88TH PL  
City-St-Zip: MIAMI LAKES, FL 33018 US

Title: VP ( ) Delete  
Name: MARTINEZ, ANA L JAIME  
Address: 16388 NW 88 PL  
City-St-Zip: MIAMI LAKES, FL 33018 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: MARTINEZ, DAGOBERTO  
Address: 16388 NW 88 TH PL  
City-St-Zip: MIAMI LAKES, FL 33018 US

Title: SEC ( ) Change (X) Addition  
Name: MARTINEZ, DAGOBERTO  
Address: 16388 N.W. 88TH PL  
City-St-Zip: MIAMI LAKES, FL 33018

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: DAGOBERTO MARTINEZ

PRES

03/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date