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May 15, 2001 8:00 am  
Secretary of State

05-15-2001 90176 015 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

2001

A0067136

DOCUMENT # P98000075935 ✓

1. Corporation Name  
SM PASTOR CORPORATION

Principal Place of Business Mailing Address  
639 Michigan Blvd  
Dunedin, FL 34698

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
09-10-98  
4. FEI Number  
59-3532268  
Applied For  
Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 639 Michigan Blvd 26  
Suite, Apt. #, etc. 27  
City & State 28  
Dunedin, FL 34698  
Zip Country 29  
Country 30

9. Name and Address of Current Registered Agent  
Marilyn I. Pastor  
7250 118th Terrace N  
Largo, FL 33773

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Marilyn I. Pastor  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
DATE 4-26-2001

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox. Rows include Marilyn I. Pastor (President) and Silverio Pastor (Vice-President).

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and Change/Addition checkboxes. Rows 1.1-1.4 are filled with the same information as the previous table.

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.

SIGNATURE: Marilyn I. Pastor - President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DATE 4-26-2001 727-736-0793

CR2E034 (11/98)