

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000020572

1. Entity Name

SMARTBUY USA.COM INC.

FILED

Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90059 005 ***150.00

Principal Place of Business

134 SOUTH CYPRESS ROAD
SUITE 411
POMPANO BEACH FL 33060

Mailing Address

134 SOUTH CYPRESS ROAD
SUITE 411
POMPANO BEACH FL 33060

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

#216
1121 SOUTH MILITARY TRAIL

Suite, Apt. #, etc.

#216
1121 S. MILITARY TRAIL

City & State

DEERFIELD BEACH, FL

City & State

DEERFIELD BEACH, FL

Zip

33442

Country

U.S.A

Zip

33442

Country

U.S.A.

4. FEI Number

65-0927634

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

O'KEEFE, THOMAS J
134 SOUTH CYPRESS ROAD
SUITE 411
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name

DANIEL GENACHTE

Street Address (P.O. Box Number is Not Acceptable)

2422 LOB LOLLY LANE

City

DEERFIELD BEACH FL

Zip Code

33442

8. 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 D. GENACHTE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required upon reinstating)

04-23-01

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PSTD** ☒ Delete
NAME **O'KEEFE, THOMAS J**
STREET ADDRESS **134 S CYPRESS RD STE-411**
CITY-ST-ZIP **POMPANO BEACH FL 33060**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☒ Change ☐ Addition
NAME **DANIEL GENACHTE**
STREET ADDRESS **2422 LOB LOLLY LANE**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

04-23-01

Date

(954) 7833155

Daytime Phone #

CR2E034 (10/00)