2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 28, 2000 8:00 am Secretary of State DOCUMENT # **P99000066882** 1. Entity Name SMARTICO, INC. 08-28-2000 90060 009 ***150.00 Principal Place of Business Mailing Address 484 SPINNAKER DRIVE 484 SPINNAKER DRIVE WESTON FL 33326 WESTON FL 33326-2939 日のなりからまや 2. Principal Place of Business 3. Mailing Address 120 Terr 2887 SW DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0936784 MILBOMOSIC MIRAMOSIC Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Ü'S A 30 2° Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 Zip Code City FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. PRESIDEUT **PSTD** ☑ Change Addition TITLE ☐ Delete TITLE # CHERNACON, MARTIN CHERNACOV, MARTIN NAME NAME 180 Tev/ 1887 SW **484 SPINNAKER DRIVE** STREET ADDRESS STREET ADDRESS er NAMASTIM 33029 CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33326 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE

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 all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date Daytime Phone #

Smartico, Inc. 2887 SW 180 Terr. Miramar, FL 33029

Tel: 954-389-TICO (8426) Fax: 509-694-6196 info@smartico.com



August 24, 2000

Division of Corporations P.O.Box 6327 Tallahassee, FL 32314

To whom it may concern,

Please accept this letter as a formal petition to extend the filling date. Our offices moved and for causes beyond our control we where not able to send the report earlier.

Thank you for you help.

Martin Chernacov

President