

**2002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90083 036 ***150.00

DOCUMENT # P99000072512

1. Entity Name

SMRT DEVELOPERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1250 NW 124 Ave.

3. Mailing Address

1250 NW 124 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

C/O Kadoch

City & State

Plantation, FL

City & State

Plantation FL

4. FEI Number

65-0959977

Applied For

Not Applicable

Zip

33323

Country

USA

Zip

33323

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Kadoch, Sheila

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

1250 NW 124th Ave.

City

Plantation

FL

Zip Code

33323

**DO NOT WRITE
IN THIS SPACE**

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

Sheila Kadoch

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/14/02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Saadon, Monique
PO Box 5082
Ft. Lauderdale, FL 33310

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Kadoch, Sheila
1250 NW 124th Ave.
Plantation, FL 33323

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

Sheila Kadoch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/14/02

CR2E034B (12/01)