

# 2002 UNIFORM BUSINESS REPORT (UBR)

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**DOCUMENT # S36532**

1. Entity Name  
**ALLOCATED RESOURCES, INC.**

FILED  
02 OCT 18 PM 2:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**916 SPRINGVILLE COURT  
TAMPA FL 33613**

Mailing Address  
**916 SPRINGVILLE COURT  
TAMPA FL 33613**



2. Principal Place of Business  
**16017 N. Florida Ave.  
Suite 105  
Lutz, FL 33549**

3. Mailing Address  
**16017 N. Florida Ave.  
Suite 105  
Lutz, FL 33549**

**REINSTATEMENT**

6. Name and Address of Current Registered Agent  
**CARUSO, ANTHONY  
916 SPRINGVILLE CT.  
TAMPA FL 33613**

7. Name and Address of New Registered Agent  
Name **Thomas J. Hampton, Jr.**  
Street Address (P.O. Box Number is Not Acceptable)  
**16017 N. Florida Ave.  
Suite 105  
Lutz, FL 33549**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE **10/15/02**

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 \$550.00  
After September 13, 2002 Fee will be \$750.00  
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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D CARUSO, ANTHONY 916 SPRINGVILLE CT. TAMPA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/D Hampton, Jr., Thomas J. 16017 N. Florida Ave. Suite 105, Lutz, FL 33549</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D/VP Hampton, Amneris 16017 N. Florida Ave. Suite 105, Lutz, FL 33549</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/D Hampton Jr., Thomas J. 16017 N. Florida Ave. Suite 105, Lutz, FL 33549</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D/VP Guerado, Richard 7220 NW 36 ST. ; suite 421 Miami, FL 33166</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>500008704075 10/30/02--01095--023 **650.00</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>500008704075 10/30/02--01095--024 **150.00</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: DATE **10/15/02** PHONE **813 407-2278**

CR2E034 (4/02)

2082



Services & Consulting, Inc.

**Date:** October, 2002

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

**Subject:** Request for Consideration

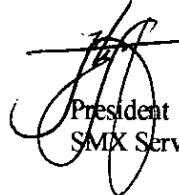
To Whom It May Concern:

Enclosed are two checks for the amounts of \$150.00 and \$600.00 necessary to pay for the annual payment and late charges for the Uniform Business Report for Allocated Resources Inc.

I am requesting that you please consider that Allocated Resources Inc. management received the UBR format late due to a change of address. Following this, they entered into the process of acquisition by our company SMX Services & Consulting II, Inc. and thus began a transition of officers as can be seen in the UBR we are returning with this letter.

Please consider these facts that influenced the timely filing of the necessary documents and funds before cashing the \$600.00 in late fees.

Thomas Hampton



President  
SMX Services & Consulting