FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

Mailing Address

HAY

Principal Place of Business

SMAR,	INC.			

FILED Jan 16 1998 8:00am Secretary of State

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157 APOLLO CIR. JUPITER FL 34477 US		157 APOLLO CIR. JUPITER FL 33477 US			DO NOT WRITE IN THIS SPA	CE		
					04/01/1991			
2.	Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
21		26			65-0258368	Not Applicable		
Suite, Apt, #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	esired		
City & State		City & State	- 7 '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24	Zip Country 25	Zip 30	⊢ ¬ ' ├¬ '		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
HAYS, ROBERT D.			81	Name				
157 APOLLO CIR. JUPITER FL 33477			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			83					
			84	City	FL ⁸	5 Zip Code		
11	office or registered agent, or both, in the		ized by	the corporation	oration submits this statement for the purpose of cha on's board of directors. I hereby accept the appoint			

office or r agent, I a	egistered agent, or both, in the State of Florida. Suc m familiar with, and accept the obligations of, Section	n change was au on 607.0505, Flori	inorized by the corp da Statutes.	oration's board of directors. I hereby accept to	ne appointment as	registerea
SIGNATURE	Signature, typed or printed name of registered agent and title if applical	NOTE 6	Registered Agent signature	required when reinstalled	DATE	
12.	OFFICERS AND DIRECTORS	Je. (1012.1	13.	ADDITIONS/CHANGES TO OFFICE		S IN 12
TITLE	P	DELETE	1.1 TITLE		Change	Addition
NAME	HAYS, ROBERT D.		1.2 NAME			
STREET ADDRESS	157 APOLLO CIR.		1.3 STREET ADDRESS			
CITY - ST - ZIP	JUPITER FL		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	Addition
NAME	HAYS, LYNN S.		2.2 NAME			
STREET ADDRESS	157 APOLLO CIR.		2.3 STREET ADDRESS			
CITY-ST-ZIP	JUPITER FL		2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4 CITY-ST-ZIP			
TITLE	•	☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS		j	6.3 STREET ADORESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

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 or an attachment with an address.

SIGNATURE:

SIGNATURE:

561 747 9915