


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 14, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # V01044**  
1. Entity Name  
**ATTORNEY ARTHUR B. SMITH, P.A.**



Principal Place of Business  
**915 MIDDLE RIVER DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304**

Mailing Address  
**915 MIDDLE RIVER DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BULDING  
FT LAUDERDALE, FL 33304**

**DO NOT WRITE IN THIS SPACE**



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number  
**65-0300897** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SMITH, ARTHUR B  
915 MIDDLE DRIVE, SUITE 420  
GALLERIA PROFESSIONAL BUILDING  
FT LAUDERDALE, FL 33304**

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

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  **\$5.00 May Be  
Added to Fees**

U00000780982  
01/15/08-80017-001 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, ARTHUR B 915 MIDDLE RIVER DRIVE, SUITE 420 FT LAUDERDALE, FL 33304
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arthur B. Smith, President 1/10/08 954-564-8894  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #