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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 10 PM 1:50

DOCUMENT # V55829 (8)

1. Corporation Name
C.R. SMITH INCORPORATED

Principal Place of Business	Mailing Address
13069 SW 133 CT MIAMI FL 33186 US	13069 SW 133 CT MIAMI FL 33186 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/03/1992
3a. Date of Last Report: 01/21/1994

2. Principal Place of Business
21 1100 No. 50th Street
Suite, Apt. #, etc.
22 Unit 3B
City & State
23 Tampa, FL
Zip 24 33619 Country 25 USA

2a. Mailing Address
26 1100 No. 50th Street
Suite, Apt. #, etc.
27 Unit 3B
City & State
28 Tampa, FL
Zip 29 33619 Country 30 USA

4. FEI Number: 65-0358571 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HITCHCOCK, ROBERT
10021 SW 97TH COURT
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name: Michele Watarz
82 Street Address (P.O. Box Number is Not Acceptable): 1100 N. 50th St., Unit 3B
83
84 City: Tampa FL 85 Zip Code: 33619

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Michele Watarz — Michele Watarz — 1/19/95
(Signature of new registered agent) (Typed or printed name of registered agent) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, CHARLES R. 11766 SW 92 TERR MIAMI FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	P/D Smith, Charles R. 1100 N. 50th St., Unit 3B Tampa, FL 33619 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WATARZ - SMITH, MICHELE 11766 SW 92ND TERR MIAMI FL	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	V/S/T/D Watarz, Michele 1100 N. 50th St., Unit 3B Tampa, FL 33619 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HITCHCOCK, ROBERT 10021 SW 97TH COURT MIAMI FL	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	DELETED ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 on an attachment with an address.

SIGNATURE: Charles R. Smith, Pres. — 1/19/95 — 813-248-5515
(Signature and typed or printed name of officer or director) (Date) (Daytime Phone #)

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