No. C 209674		Due no later than May 31, 2017	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SMI SPECIAL SERVICES, INC. 2180 W STATE RD 434 STE 5000 LONGWOOD FL 32779	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ess Addresses of President, Secretary, and Directors. Treasurer	(ontional)				
	lame	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR B	BRADLEY POI HOWARD PO	MP 2180 W STATE RD 434 STE 5000	LONGWOOD LONGWOOD	FL FL	USA	32779 32779	
5. Organized Under the Laws of: MD		6. Annual Report must be signed.* Signature: HOWARD POMP	Date: 03/31/2017				
C 209674		Name (type or print): HOWARD POMP Title: PRESIDENT					
Processed 03/31/2017		* Electronically provided signatures are accepted as original signatures.					