2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J47319

Entity Name: SIM PROPERTIES, INC.

FILED Mar 05, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Cullent Finicipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

C/O JOSEPH SIMONELLI C/O JOSEPH SIMONELLI BOX 314 RTE 193 BOX 314

THOMPSON, CT 06277 US THOMPSON, CT 06277 US

Current Mailing Address: New Mailing Address:

C\O JOSEPH SIMONELLI
BOX 314 RT. 193

C\O JOSEPH SIMONELLI
BOX 314

THOMPSON CT., 06277 US THOMPSON, CT 06277 US

FEI Number: 59-2747467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMONELLI, JOSEPH
860 ELDORADO AVE.
CLEARWATER, FL 34630

SIMONELLI, JOSEPH
860 ELDORADO AVE.
CLEARWATER, FL 33767

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.

SIGNATURE: 03/05/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

Name:SIMONELLI, JOSEPH E.,Name:Address:860 ELDORADO AVENUEAddress:City-St-Zip:CLEARWATER BEACH, FLCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH E. SIMONELLI PD 03/05/2004