

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 518024

Entity Name: SIMCLAR, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

2230 WEST 77TH STREET
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2230 W 77 ST.
HIALEAH, FL 33016 US

New Mailing Address:

2230 W 77 STREET
HIALEAH, FL 33016 US

FEI Number: 59-1709103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRIFFIN, MARSHALL
2230 WEST 77TH STREET
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

DONNELLY, STEPH
2230 WEST 77TH STREET
HIALEAH, FL 33016 US

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: STEPH DONNELLY

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: RUSSEL, SAMUEL
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL 33016

Title: PD () Delete
Name: PARDON, BARRY
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL

Title: CFO () Delete
Name: GRIFFIN, MARSHALL
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: MANSON, A. GZAMIE
Address: 2230 W 77 ST
City-St-Zip: HIALEAH, FL 33016

Title: VPFD () Delete
Name: DURIE, JOHN I
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: RUSSEL, CHRISTINA M
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: DONNELLY, STEPH
Address: 2230 W. 77 ST.
City-St-Zip: HIALEAH, FL 33016

Title: D (X) Change () Addition
Name: MANSON, A. GRAME
Address: 2230 W 77 ST
City-St-Zip: HIALEAH, FL 33016

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BARRY PARDON

PD

02/04/2009

Electronic Signature of Signing Officer or Director

Date