2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 18, 2008
Secretary of State

DOCUMENT# F92000000234

Entity Name: SIMCOM INC.

Current Principal Place of Business:

6989 LEE VISTA BLVD
MIAMI, FL 33122

New Principal Place of Business:

6989 LEE VISTA BLVD
ORLANDO, FL 32822

Current Mailing Address:

6989 LEE VISTA BLVD
MIAMI, FL 33122 US

New Mailing Address:

6989 LEE VISTA BLVD
ORLANDO, FL 32822

FEI Number: 65-0367984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: JOYCE L. MARKLEY AS ITS AGENT
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CHILDS, JOHN
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: DP ( ) Delete
Name: DAVID, WALTER W
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: DVP ( ) Delete
Name: BRANNON, TRACY
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: CFOE ( ) Delete
Name: TUNER, ROBERT
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: D ( ) Delete
Name: HOPKINS, GLENN
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change ( ) Addition
Name: CROOK, ROBERT
Address: 6989 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

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: TRACY BRANNON DVP 12/18/2008
Electronic Signature of Signing Officer or Director Date