2008 FOR PROFIT CORPORATION

May 01, 2008 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # H29403 05-01-2008 90221 018 ***150.00 SIMON AND CHRIS, INC. Principal Place of Business Mailing Address 1990 MAIN ST 1990 MAIN ST SUITE 801 SUITE 801 SARASOTA, FL 34236 SARASOTA, FL 34236 No Cha-P CR2E034 (11/05) 04172008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2553314 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GLENDINNING, RENEA M DO NOT WRITE **1990 MAIN ST** SUITE 801 IN THIS SPACE SARASOTA, FL 34236 8. 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MROTZEK, GUENTHER NAME 1055 GULF OF MEXICO DR STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY, FL TITLE MROTZEK, ANITA 1055 GULF OF MEXICO DR STREET ADDRESS CITY-ST-ZIP LONGBOAT KEY, FL NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is trie 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 receive or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplemental report is tr of the corporation or the receive or trustee empow changed, or on an attachment with an address, w

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-7IP

FILED