2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003441

Entity Name: EQUIPMENT SIMULATIONS LLC

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

221 HEADHOUSE COURT PHILADELPHIA, PA 19147

Current Mailing Address: New Mailing Address:

221 HEADHOUSE COURT PHILADELPHIA, PA 19147

FEI Number: 56-2672082 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: PRES (X) Change () Addition Name: BRENDEL, STEFAN Name: KAYE, JONATHAN Address: JOSEF-RIES-STR 13 Address: 221 HEADHOUSE COURT

Address: JUSEF-RIES-STR 13 Address: 221 HEADHOUSE COORT
City-St-Zip: 99086 ERFURT, GERMANY, XX City-St-Zip: PHILADELPHIA, PA 19147

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 VON TUCKER, ENDRE
 Name:

 Address:
 JOSEF-RIES-STR 13
 Address:

 City-St-Zip:
 99086 ERFURT, GERMANY, XX
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SHELTON, MARIAN
 Name:

 Address:
 870 UNITED NATIONS PLAZA, APT. 21-F
 Address:

 City-St-Zip:
 NEW YORK, NY 10017
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 EISEN, GLENN
 Name:

 Address:
 790 RANCH LANE
 Address:

 City-St-Zip:
 PACIFIC PALISADES, CA 90272
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 HAGEMEIER, LUISA
 Name:

 Address:
 211 CENTRAL PARK WEST
 Address:

 City-St-Zip:
 NEW YORK, NY 10024
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 HAGEMEIER, JAN
 Name:

 Address:
 211 CENTRAL PARK WEST
 Address:

 City-St-Zip:
 NEW YORK, NY 10024
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JONATHAN KAYE PRES 04/06/2009