

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000000157

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** SIMBA INTERNATIONAL VENTURE CAPITAL LLC.

**Current Principal Place of Business:**

1650 ART MUSEUM DRIVE, #11  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

1650 ART MUSEUM DRIVE, #11  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 11-3796467

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DEMPS, JOHN W SR.  
1650 ART MUSEUM DRIVE, #11  
JACKSONVILLE, FL 32207 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** NYAGAH, SIMON K  
**Address:** 1650 ART MUSEUM DRIVE, #11  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** MGRM  
**Name:** DEMPS, JOHN W SR.  
**Address:** 1650 ART MUSEUM DRIVE, #11  
**City-St-Zip:** JACKSONVILLE, FL 32207

**Title:** MGR  
**Name:** THOU, WAMBUGU  
**Address:** 38 5TH STREET  
**City-St-Zip:** FORDS, NJ 08863

**Title:** MGR  
**Name:** HOPE, ARTIE  
**Address:** 1650 ART MUSEUM DRIVE, SUITE 11  
**City-St-Zip:** JACKSONVILLE, FL 32207

I hereby 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:** JOHN W. DEMPS, SR.

MGRM

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date