Aug 31, 2001 8:00 am Secretary of State **DOCUMENT#** P00000095388 1. Entity Name 07-24-2001 90001 034 ***550.00 SIMI INTERNATIONAL, INC. Principal Place of Business Mailing Address 16500 N W 2ND AVENUE 16500 N W 2ND AVENUE NORTH MIAMI FL 33169 NORTH MIAMI FL 33169 2. Principal Place of Business 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip \$8.75 Additional Country 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JUTY Singh MUGHAR, TERRY Street Address (P.O. Box Number is Not Acceptable) 16500 N W 2ND AVENUE NORTH MIAMI FL 33169 1600 Nω 2nd Arene Miani 8: The above named entity submits this stateme for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Jen SIGNATURE This corporation seligible to satisfy its to Tax filing sequirement and elects to do so. FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Added to Fees After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME SINGH, JERRY M STREET ADDRESS 3894 VRESTWOOD CIRCLE STREET ADDRESS CITY-ST-ZIP WESTON FL 33331 CITY-ST-71P TITLE ☐ Delete nne Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CIFY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Defete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-718 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119,07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am any 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 in Block 11 or Block 12 inchanged, or on an attachment with an address, with all other life empowered. 7-P01 SIGNATURE:

2001 UNIFORM BUSINESS REPORT (UBR)

FILED