

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000102589

Entity Name: DANIEL SIMON ASSOCIATES INC.

FILED
Feb 10, 2006
Secretary of State

Current Principal Place of Business:

21 EDGEWATER DR.
#5
CORAL GABLES, FL 33133

New Principal Place of Business:

262 MIRACLE MILE
CORAL GABLES, FL 33134

Current Mailing Address:

21 EDGEWATER DR.
#5
CORAL GABLES, FL 33133

New Mailing Address:

262 MIRACLE MILE
CORAL GABLES, FL 33134

FEI Number: 42-1604974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SIMON, DANIEL
21 EDGEWATER DR.
#5
CORAL GABLES, FL 33133 US

Name and Address of New Registered Agent:

HITE, CATHERINE ESQ.
799 BRICKELL PLAZA
700
MIAMI, FL 33131 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: CATHERINE HITE, ESQ.

02/10/2006

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: DPVS () Delete
Name: SIMON, DANIEL
Address: 1745 SW 13 AVE
City-St-Zip: MIAMI, FL 33145

Title: T (X) Delete
Name: SIMON, DANIEL
Address: 1745 SW 13 AVE
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SIMON, DANIEL
Address: 262 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL SIMON

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02/10/2006

Electronic Signature of Signing Officer or Director

Date