## 2007 FOR PROFIT CORPORATION FILED **ANNUAL REPORT** Feb 19, 2007 08:00 A Secretary of State **DOCUMENT # P04000124944** 1. Entity Name SIMSTEC ELECTRICAL CORP. Mailing Address Principal Place of Business " 1610 CALLIE COUNT 1610 CALLIE COUNT · APOPKA, FL 32703 · US APOPKA, FL 32703 CR2E034 (11/05) 01032007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1642477 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIMS, WILLIE R DO NOT WRITE 1610 CALLIE COURT APOPKA, FL 32703 IN THIS SPACE 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 the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME SIMS, WILLIE R SR 1610 CALLIE COURT STREET ADDRESS CITY-ST-ZIP APOPKA, FL 32703 000000640555 02/28/07-80070-023 150.00 THE NAME SIMS, THERESA A STREET ADDRESS 1610 CALLIE COURT CITY-ST-ZIP APOPKA, FL 32703 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 true 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 receiver 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wille R. Jim

NAME STREET ADDRESS CITY - ST- ZIP

2-14-07

Daytime Phone #