

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158607

Entity Name: SIMAN'S SERVICES, CORP.

FILED
Jul 19, 2006
Secretary of State

Current Principal Place of Business:

1124 GRAND CLUB BLVD
FORT PIERCE, FL 34982 US

New Principal Place of Business:

522 NW MARION AVENUE
FORT PIERCE, FL 34983 US

Current Mailing Address:

1124 GRAND CLUB BLVD
FORT PIERCE, FL 34982 US

New Mailing Address:

522 NW MARION AVENUE
FORT PIERCE, FL 34983 US

FEI Number: 20-1910434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPES, RUY
1124 GRAND CLUB BLVD
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

LOPES, RUY
522 NW MARION AVENUE
FORT PIERCE, FL 34983 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: RUY LOPES

07/19/2006

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: PD () Delete
Name: LOPES, RUY
Address: 1124 GRAND CLUB BLVD
City-St-Zip: FORT PIERCE, FL 34982 US

Title: D (X) Delete
Name: FERRO, SANDRA M
Address: 1124 GRAND CLUB BLVD
City-St-Zip: FORT PIERCE, FL 34982 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOPES, RUY
Address: 522 NW MARION AVENUE
City-St-Zip: FORT PIERCE, FL 34983 US

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: RUY LOPES

PD

07/19/2006

Electronic Signature of Signing Officer or Director

Date