

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000044115

FILED
Jan 04, 2008
Secretary of State

Entity Name: SIMON ELIMELECH SERVICES, INC

Current Principal Place of Business:

5650 NW 74TH PLACE
STE 102
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

5650 NW 74TH PLACE
STE 102
COCONUT CREEK, FL 33073 US

New Mailing Address:

FEI Number: 20-4602644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELIMELECH, SIMON
5650 NW 74TH PLACE
102
COCONUT CREEK, FL 33073 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELIMELECH, SIMON
Address: 5650 NW 74TH PLACE STE 102
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: VP () Delete
Name: ELMALAH, SVIKA
Address: 5650 NW 74TH PLACE
City-St-Zip: COCONUT CREEK, FL 33073 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

MR

01/04/2008

Electronic Signature of Signing Officer or Director

_____ Date