2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000056854

Entity Name: SIMPLEHOUSEHOLD INC.

FILED Mar 26, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
398 E. DANIA BEACH BLVD. #315 DANIA BEACH, FL 33004			398 E. DANIA BEACH #315	398 E. DANIA BEACH BLVD. #315	
			DANIA BEACH, FL 3:	3004	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
398 E. DANIA BEACH BLVD. #315 DANIA BEACH, FL 33004				398 E. DANIA BEACH BLVD. #315	
				DANIA BEACH, FL 33004	
FEI Number	: 26-2779888	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
11380 PR		NS NETWORK, INC. RMS ROAD #221E S, FL 33410 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ac	gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title:	D () Delete	Title:	() Change () Addition	
Name:	LIMA, JOSEPH		Name:		
\ddress:		BEACH BLVD. #315	Address:		
City-St-Zip:	DANIA BEACH	FL 33004	City-St-Zip:		
Γitle:	D () Delete	Title:	() Change () Addition	
Name:	BLACK, TRICIA		Name:	() Sharige () / Malalen	
\ddress:	,	BEACH BLVD. #315	Address:		
City-St-Zip:	DANIA BEACH		City-St-Zip:		
Γitle:	,) Delete	Title:	() Change () Addition	
Name:	KRAUS, SAND		Name:		
Address:		BEACH BLVD. #315	Address:		
City-St-Zip:	DANIA BEACH	FL 33004	City-St-Zip:		
Title:	D () Delete	Title:	() Change () Addition	
Name:	KRAUS, THOM	AS	Name:		
Address:	398 E. DANIA I	BEACH BLVD. #315	Address:		
City-St-Zip:	DANIA BEACH	FL 33004	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: JOSEPH LIMA D 03/26/2009