2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067295

Entity Name: SO SIMPLE SOLAR, INCORPORATED

Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11110 WEST OAKLAND PARK BLVD. SUNRISE, FL 33351 **New Mailing Address: Current Mailing Address:** 11110 WEST OAKLAND PARK BLVD. SUNRISE, FL 33351 US FEI Number: 61-1568052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRACEY, KEN 3618 N.W. 111TH TERRACE SUNRISE, FL 33351 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition TRACEY, KEN Name: Name: 11110 WEST OAKLAND PARK BLVD., SUITE 96 Address: Address: City-St-Zip: SUNRISE, FL 33351 US City-St-Zip: Title: Title: S. T () Delete (X) Change () Addition KERN, KIM KERN, KIM L Name: Name:

11110 WEST OAKLAND PARK BLVD., SUITE 96 Address:

SUNRISE, FL 33351 US City-St-Zip:

Title: D () Delete

KERN, KIM Name:

11110 WEST OAKLAND PARK BLVD., SUITE 96 Address:

City-St-Zip: SUNRISE, FL 33351 US Name: KERN, KIM L 11110 WEST OAKLAND PARK BLVD., SUITE 96 Address:

SUNRISE, FL 33351 US

11110 WEST OAKLAND PARK BLVD., SUITE 96

(X) Change () Addition

City-St-Zip: SUNRISE, FL 33351 US

D

Address:

Title:

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: KIM L KERN TREA 04/30/2009