FILED
Apr 27, 2007 08:0
Secretary of St

# FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P40613

1. Entity Name
SIMPLY RELIABLE POWER INCORPORATED

Principal Place of Business
10431 N COMMERCE PKWY
MIRAMAR, FL 33025

Mailing Address
10431 N COMMERCE PKWY
MIRAMAR, FL 33025

03282007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2648049

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GOLD, STUART M
6625 MIAMI LAKES DRIVE
SUITE 217
MIAMI LAKES, FL 33014

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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 acc the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2007 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS

10.

| | |
|---|---|
| TITLE | PTD |
| NAME | WILLIAMSON, CYRIL J |
| STREET ADDRESS | 10431 N. COMMERCE PARKWAY |
| CITY-ST-ZIP | MIRAMAR, FL 33025 |
| TITLE | VSD |
| NAME | BYERLEE, RUBEN D |
| STREET ADDRESS | 10431 NORTH COMMERCE PARKWAY |
| CITY-ST-ZIP | MIRAMAR, FL 33025 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| CITY-ST-ZIP | |

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05/11/07-80080-00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I furth 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; of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ap changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ CYRIL WILLIAMSON April 24
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date