


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # P40613 1. Entity Name SIMPLY RELIABLE POWER INCORPORATED	
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Principal Place of Business 10431 N COMMERCE PKWY MIRAMAR, FL 33025	Mailing Address 10431 N COMMERCE PKWY MIRAMAR, FL 33025
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DO NOT WRITE IN THIS SPACE



04162008 No Chg-P CR2E034 (11/05)

4. FEI Number 23-2648049	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GOLD, STUART M 6625 MIAMI LAKES DRIVE SUITE 217 MIAMI LAKES, FL 33014

**DO NOT WRITE
IN THIS SPACE**

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 accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	11000000005100 05/01/08-80042-028 158.75
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WILLIAMSON, CYRIL J 10431 N. COMMERCE PARKWAY MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BYERLEE, RUBEN D 10431 NORTH COMMERCE PARKWAY MIRAMAR, FL 33025
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	April 16, 2008 <small>Date</small>	(954) 433-2212 <small>Daytime Phone #</small>
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