

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000009083

Entity Name: SIMI SPONGE COMPANY INC.

FILED
Mar 27, 2009
Secretary of State

Current Principal Place of Business:

352 BOCA CHICA RD
KEY WEST, FL 33040 US

New Principal Place of Business:

354 BOCA CHICA RD
KEY WEST, FL 33040 US

Current Mailing Address:

352 BOCA CHICA RD
KEY WEST, FL 33040 US

New Mailing Address:

354 BOCA CHICA RD
KEY WEST, FL 33040 US

FEI Number: 65-0384371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STAFFORD, SIMON R B
352 BOCA CHICA RD
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

STAFFORD, SIMON R B
354 BOCA CHICA RD
KEY WEST, FL 33040 US

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:

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STAFFORD, MARY L B
Address: 352 BOCA CHICA RD
City-St-Zip: KEY WEST, FL 33040

Title: S () Delete
Name: STAFFORD, SIMON R
Address: 352 BOCA CHICA RD
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STAFFORD, MARY L B
Address: 354 BOCA CHICA RD
City-St-Zip: KEY WEST, FL 33040

Title: S (X) Change () Addition
Name: STAFFORD, SIMON R
Address: 354 BOCA CHICA RD
City-St-Zip: KEY WEST, FL 33040

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 R STAFFORD

S

03/27/2009

Electronic Signature of Signing Officer or Director

Date