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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076952 1. Corporation Name

SIMON'S STORE, INC.

Increby certify that the information supplied with this limit does not qualify for the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or the true 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 12 or Block 13 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90015 041 ***150.00



	of Business								
331 ABBERTON	I DR	1331 ABBERTON DR							
PRLANDO FL 32821		ORLANDO FL 32821			DO NOT WRITE IN THIS SPACE				
IS		US		•	Date Incorporated or Qualifed			 	
								•	
					10/19/1994 4. FEI Number		Δ,	pplied For	
2. Principal Pla	ace of Business	2a. Mailing Address			•		_ 	ot Applicabl	
<u></u>		26			59-3292697			Additional	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		T	equired	
2	<u> </u>	27			a Florida Constitut Financia			May Be	
City & State	1	City & State			Election Campaign Financing Trust Fund Contribution			to Fees	
3		28	Country		This corporation owes the curre	nt year Int			
Zip	Country	Zip	一		Personal Property Tax.	in year in	Yes	□No	
4	25		30		10. Name and Address of New Ro	egistered			
	9. Name and Address of Curre	int Registered Agent	81	Name	TO. Maille and Address of New It	- 3	3 ,		
ARIA	ID AFTS A A I	•	1 1						
ARID,	, IMRAN		82	Street Add	ress (P.O. Box Number is Not Acceptal	ble)			
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	• ,			•		LL	<u> </u>		
11. Pursuant t	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the above-	named corp	poration submits this statement for the ion's board of directors. I hereby accept	purpose of t the appo	i changing it intment as r	s registered egistered	
	egistered agent, or both, in the State in familiar with, and accept the oblig				ion's board of directors thereby arra-p			•	
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to agent. Lar	Il fallillat with, and accept the cong	gations of, Section 607.0000, Flori	na omnoco.		•				
(5) agent. I ar					red when reinstating)	DATE			
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(5) agent. I ar	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE:	Registered Agent		red when reinstating) ADDITIONS/CHANGES TO OFF		ND DIRECT		
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