

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000037365 (0)

1. Corporation Name

SIMS COMMUNICATIONS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

3333 SOUTH CONGRESS AVENUE STE 401
DELRAY BEACH FL 33445

3333 SOUTH CONGRESS AVENUE STE 401
DELRAY BEACH FL 33445

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1995

4. FEI Number

65-0583440

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 4551 N. Dixie Hwy.

Suite, Apt. #, etc.

22

City & State

23 Boca Raton, FL

Zip

24 33431

Country

25 USA

2a. Mailing Address

26 4551 N. Dixie Hwy.

Suite, Apt. #, etc.

27

City & State

28 Boca Raton, FL

Zip

29 33431

Country

30 USA

9. Name and Address of Current Registered Agent

LEINER, MEL
4860 NW 65 AVE
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent

81 Name Bruce Schames

82 Street Address (P.O. Box Number is Not Acceptable)

83 4551 N. Dixie Hwy.

84 City Boca Raton

FL

85 Zip Code 33431

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CDP
NAME LEINER, MEL
STREET ADDRESS 4860 NW 65TH AVE
CITY-ST-ZIP LAUDERHILL FL 33319

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME Mark Bennett
1.3 STREET ADDRESS 17821 Skypark Circle, Suite G
1.4 CITY-ST-ZIP Irvine, CA 92614

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E034 (10/97)