

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000008610

Entity Name: SIMBO'S ENTERPRISES, INC.

FILED  
Oct 13, 2005  
Secretary of State

## Current Principal Place of Business:

2005 S WARKESHA ST  
BONIFAY, FL 32425

## New Principal Place of Business:

## Current Mailing Address:

1002 S WAUKESHA ST  
BONIFAY, FL 32425

## New Mailing Address:

FEI Number: 59-3458194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMMS, JAMES L  
2431 FRANKFORD AVE  
PANAMA CITY, FL 32405 US

## Name and Address of New Registered Agent:

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: JAMES L SIMMS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SIMS, BETTY L  
Address: 1002 S WAUKESHA ST  
City-St-Zip: BONIFAY, FL 32425

Title: D ( ) Delete  
Name: SIMMS, JAMES L  
Address: 2431 FRANKFORD AVE  
City-St-Zip: PANAMA CITY, FL 32405

Title: D ( ) Delete  
Name: SIMMS, MYRTICE  
Address: 2431 FRANKFORD AVE  
City-St-Zip: PANAMA CITY, FL 32405

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETTY SIMS

OWNE

10/13/2005

Electronic Signature of Signing Officer or Director

Date