2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 21, 2006 8:00 am **Secretary of State** DOCUMENT # P97000057466 03-21-2006 90008 022 ***150.00 SOUTH FLORIDA ELECTRIC, INC. Principal Place of Business Mailing Address PO BOX 6375 4271 NE 7TH AVE FT LAUDERDALE FL 33310-6375 FT LAUDERDALE FL 33310-6375 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 65-0769109 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SMiC SIMS, JOHN T Street Address (P.O. Box Number is Not Acceptable) 4200 INVERRARY BLVD APT 3407 LAUDERHILL FL 33319 8. The above named entity submits this statement for the purpose of changing its registered office or register the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change Addition SIMS, JOHN T NAME STREET ADDRESS STREET ADDRESS 4200 INVERRARY BLVD 3407 CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME RODNEY L SIMS STREET ADDRESS STREET ADDRESS 4281 NW 36TH WAY CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LKS FL 33309 ☐ Addition TITLE ☐ Delete NAME JAMES E SIMS STREET ADDRESS STREET ADDRESS 591 HWY 25 S CITY-ST-ZIP CITY-ST-ZIP WAYNESBORO GA 30830 ☐ Change ☐ Addition TITLE Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

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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:

3/9/06 (954)568-5158