

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000075214

**Entity Name:** JAMES CROSS, INC.

**Current Principal Place of Business:**

8775 SW 133 STREET  
MIAMI, FL 33176

**Current Mailing Address:**

8775 SW 133 STREET  
MIAMI, FL 33176 US

**FEI Number:** 65-0610587

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CROSS, JAMES L  
8220 S.W. 162 STREET  
MIAMI, FL 33157 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CROSS, JAMES L  
Address 8220 S.W. 162 STREET  
City-State-Zip: MIAMI FL 33157

Title SEC  
Name CROSS, CHRISANNE  
Address 8220 S.W. 162 STREET  
City-State-Zip: MIAMI FL 33157

Title V  
Name CROSS, TRAVIS J  
Address 8000 SW 184 LANE  
City-State-Zip: CUTLER BAY FL 33157

Title TREAS  
Name CROSS, ANDREA  
Address 8000 SW 184 LANE  
City-State-Zip: CUTLER BAY FL 33157

Title VP  
Name CROSS, BENN  
Address 8775 SW 133 STREET  
City-State-Zip: MIAMI FL 33176

*I hereby 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 all other like empowered.*

**SIGNATURE:** ANDREA CROSS

**TREASURER**

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date