

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 11:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # J43373 (6)**

1. Corporation Name

**READY ROAD REPAIR, INC.**

Principal Place of Business

**2741 SW 38TH ST  
FT. LAUDERDALE FL 33312  
US**

Mailing Address

**P O BOX 866  
DANIA FL 33004  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**11/17/1986**

3a. Date of Last Report

**05/01/1994**

4. FEI Number

**59-2735870**

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 has liability for intangible tax under S. 109.002,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

22

City & State

27

Zip

23

Country

24

Zip

25

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SIMS, BOBBY  
40 S.W. 4TH STREET  
DANIA FL 33004**

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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

NAME

STREET ADDRESS

CITY - ST - ZIP

**PD  
SIMS, BOBBY  
40 S.W. 4TH STREET  
DANIA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**STD  
SIMS, EMILY  
40 S.W. 4TH STREET  
DANIA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VD  
SIMS, ROBERT J.  
21 S.E. 1ST ST.  
DANIA FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

15

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

25

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

35

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

45

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

55

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 a 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/95**

**305/321-9661**