

**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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 MAY 25 PM 12: 17**

**DOCUMENT # K77598 (6)**

1. Corporation Name

**SIMMONS AND HARRIS, INC.**

Principal Place of Business

**9781 SOUTHWEST 130TH STREET  
MIAMI FL 33176**

Mailing Address

**9781 SOUTHWEST 130TH STREET  
MIAMI FL 33176**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**04/04/1989**

3a. Date of Last Report

**01/12/1995**

4. FEI Number

**59-2455684**

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 109 (1)?  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

**21**

Suite, Apt. #, etc.

**22**

City & State

**23**

Zip

Country

**24**

2a. Mailing Address

**26**

Suite, Apt. #, etc.

**27**

City & State

**28**

Zip

Country

**29**

**30**

9. Name and Address of Current Registered Agent

**JONES, CHARLES L.  
9900 SW 168TH STREET  
SUITE 9  
MIAMI FL 33157**

81 Name

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

83

84 City

**FL**

85 Zip Code

10. Name and Address of New Registered Agent

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP**  
NAME **HARRIS, NATHANIEL**  
STREET ADDRESS **9781 SW 130TH ST.**  
CITY - ST - ZIP **MIAMI FL**

TITLE **DV**  
NAME **HARRIS, FREDDIE L.**  
STREET ADDRESS **8784 SW 177TH TERRACE**  
CITY - ST - ZIP **MIAMI FL**

TITLE **DT**  
NAME **SIMMONS, JOHN E.**  
STREET ADDRESS **8825 SW 177TH TERRACE**  
CITY - ST - ZIP **MIAMI FL**

TITLE **S**  
NAME **HARRIS, CAROLYN**  
STREET ADDRESS **9781 SW 130TH ST.**  
CITY - ST - ZIP **MIAMI FL**

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

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

☐ Change ☐ Addition

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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 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: John E. Simmons - John E. Simmons**

**5/22/95**

**305-238-7680**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #