


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000051381</b>		
1. Entity Name <b>SIMMS STREET, LLC</b>		
Principal Place of Business <b>1600 SOUTH OCEAN DRIVE, APARTMENT 6I HOLLYWOOD, FL 33019</b>	Mailing Address <b>1600 SOUTH OCEAN DRIVE, APARTMENT 6I HOLLYWOOD, FL 33019</b>	



04162007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-2947119</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>SAMUEL SPENCER BLUM, ESQUIRE 2666 TIGERTAIL AVENUE, SUITE 106 COCONUT GROVE, FL 33133</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000719452  
05/01/07-80064-013 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOOMEY, JOSEPH M 1600 SOUTH OCEAN DRIVE, APARTMENT 6I HOLLYWOOD, FL 33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TOOMEY, MARY LOU 1600 SOUTH OCEAN DRIVE, APARTMENT 6I HOLLYWOOD, FL 33019
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** *Joseph M. Toomey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*4-16-07* *954-921-7609*  
Date Daytime Phone #