FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000087541 (6)

SHERWIN P. SIMMONS, P.A.

Principal Place of Business Mailing Address 200 S. BISCAYNE BLVD. 200 S. BISCAYNE BLVD. 4000 FIRST UNION FINANCIAL CENTER 4000 FIRST UNION FINANCIAL CENTER MIAMI FL 33131-2398 DO NOT WRITE IN THIS SPACE MIAMI FL 33131-2398 3. Date Incorporated or Qualified 12/01/1994 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 65-0545909 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Z+p Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SIMMONS, SHERWIN P 200 S. BISCAYNE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) 4000 FIRST UNION FINANCIAL CENTER 83 MIAMI FL 33131-2398 84 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 4 applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE SIMMONS, SHERWIN P NAME 1.2 NAME 200 S. BISCAYNE BLVD., #4000 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131-2398 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE SIMMONS, SHERWIN P 2.2 NAME 200 S BISCAYNE BLVD 4000 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED

May 13 1998 8:00am

Secretary of State