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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra <u>B. Mortha</u>m

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000044747 (8)

FILED May 22 1998 8:00am Secretary of State

SIMMO	ns Brothers, Inc.	·				
Principal Plac	ce of Business	Mailing Address	······································			9 <u>11 61410 18640 41881 1841 1881</u>
508 E. SHELL POINT RD. 508 E. SHELL POINT RD. RUSKIN FL 33570 RUSKIN FL 33570					DO NOT WRITE IN THI	S SPACE
i					3. Date Incorporated or Qualified	
					05/20/1997	
} 	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 Cuito Ant	4	26			59. 3457736	Not Applicable
Suite, Apt.	#, e tc.	Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le ·	City & State		 .	6. Election Campaign Financing	\$5.00 May Be
23	•	28			Trust Fund Contribution	Added to Fees
Ζφ,	Country	Ζφ	Countr	у	8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	Yes 🗌 No
	9. Name and Address of Curre	nt Registered Agent	81	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registere	d Agent
REIBER, SAM I				Name		
601 E. TWIGGS ST., STE. 200			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
TAI	MPAN FL 33602		83			
			[03	<u>'</u>	• •	
	· ·		84	City	F	85 Zip Code
44 Pursuant	to the prevenienc of Sections 607.01	02 and C07 1608 Florida St	atutes the abou	o named con	poration submits this statement for the purpose	
office or r	registered agent, or both, in the State	e of Florida, Such ch ange w	as authorized b	y the corpora	tion's board of directors. I hereby accept the ap	pointment at registered
agent. la	am lam iliar with, and accept the oblig	gations of, Section 607.0505	, Florida Statute	·S.		
SIGNATURE	Signature, typed or profed name of registered as	real and title if applicable	(NOTE: Registered Ac	ent signature renu	ired when reinstating) DATE	
12.		ID DIRECTORS	13.	ioni digitaliano roda	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	President	☐ DELE TE	1 1 THLE			Change Addition
NAME			1.2 NAME	`		
STREET ADDRESS	Samuel Simmons 508 E. Shell Po	int Road	1.3 STREE	T ADDRESS		
CITY-ST-ZIP	Ruskin, Fl 3357	70	1.4 CITY -	ST-ZIP		
TITLE	Vice President Dean Simmons	DELFTE	2.1 TITLE			Change Addition
NAME	Dean Simmons		2 2 NAME	ļ		
STREET ADDRESS	508 E. Shellpoi	int Road	2.3 STRFE	1 ADDRESS		
CITY-ST-ZIP	Ruskin, Fl 3357		2. 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	Ì		
STREET ADDRESS			33 STREE	T ADDRESS		
CITY-ST-ZIP		T no exe	3.4. C/TY-	ST - ZIP		Charge I Addus-
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-1 5.1 TITLE	SI-ZIP		Change Addition
TITLE		L) vectite	5.1 HILE 5.2 NAME			— orange (
NAME OTDEET ADDRESS				T ADDRESS		
STREET ADDRESS			1	ì		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- 61 TrILE	91-7M		Change Addition
NAME		- Petric	6.2 NAME	1	20000025347	
STREET ADDRESS	1		1	T ADDRESS	2000025347 -05/26/9801035	108 / 100 Store
CITY+ST-ZIP			6.4 CITY-		***150.00) 5\'
	certify that the information supplied a	with this filing does not qual			Section 119.07(3)(i). Florida Statutes, I further	certify that the information

4. I 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 is upullemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Granged, or on an attachment with an address.

\$13-645-144