

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

FILED

May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V53694 (8)
1. Corporation Name
SIMMONS CONSTRUCTION AND PAINT, INC.



Principal Place of Business 12313 SW 133 COURT MIAMI FL 33186 US	Mailing Address 12313 SW 133 COURT MIAMI FL 33186 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 18495 S. DIXIE H'WAY Suite, Apt. #, etc. 22 SUITE 170 City & State 23 MIAMI, FLA. Zip 24 33157		2a. Mailing Address 26 18495 S. DIXIE H'WAY Suite, Apt. #, etc. 27 Suite 170 City & State 28 MIAMI, FLA. Zip 29 33157		3. Date Incorporated or Qualified 07/24/1992	
				4. FEI Number 65-0348260	
				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 owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent SIMMONS, SPENCER JOSEPH 12313 SW 133 COURT MIAMI FL 33186		10. Name and Address of New Registered Agent 81 Name SPENCER J. SIMMONS 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City MIAMI FL 85 Zip Code 33157	
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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 Spencer J. Simmons SPENCER J. SIMMONS 4/27/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SIMMONS, SPENCER J 11590 SW 112 AVE MIAMI FL 33186	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	VT SIMMONS, SPENCER J. 18495 S. DIXIE H'WAY STE. 170 MIAMI, FLA. 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS SIMMONS, AMY S 12313 S.W. 133 CT. MIAMI FL 33186	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	PDS SIMMONS, AMY S. 18495 S. DIXIE H'WAY- STE. 170 MIAMI, FLA.
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. 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 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: Amy Simmons AMY SIMMONS 4/28/98 305.281-8406

CR2E034 (10/97)