FOR PROFIT CORPORATION UNIFORM-BUSINESS REPORT (UBR)

FILED Jan 31, 2005 8:00 am Secretary of State

UNIFC	NIN DOSINE	33 KEPUKI (UBK)	Secretary	ı State
DOCUMENT # P00000042780 1. Entity Name				01-31-2005 90055 035	
COOK INTERNATIO	NAL TRADE & BRO	KERAGE INC			
DO N	OT WRITE	IN THIS S	PACE	40008866	м.ч
2. Principal Place of Business 200 EXECUTIVE WAY		3. Mailing Address			• • •
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State PONTE VEDRA BEACH, FL		City & State		4. FEI Number 59-3646593	Applied For Not Applicable
Zip 32082-2711	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
			7. Nan	ne and Address of Current Regi	stered Agent
			Name COOK, DANIEL P.		
DO NOT WRITE			Street Address (P.O. Box Number is Not Acceptable)		
	N THIS SP	ACE	10 SAN JUAI	N CIRCLE	
	•		City	PA BEACH FL	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the					
	am familiar with, an	d accept the obligation	is of registered ager	nt.	
SIGNATURE	ure, typed or printed name	of registered agent and title if	applicable. (NOTF: Regi	stered Agent signature required when reinst	tating) DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State				Selection Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.		ND DIRECTORS	11.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COOK, DANIEL P. 10 SAN JUAN CIRC PONTE VEDRA BE		NAME STREET ADDRES CITY-ST-ZIP	S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRES CITY-ST-ZIP	S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRES CITY-ST-ZIF	s L. DO NOT V	VRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRES CITY-ST-ZIP	IN THIS S	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRES CITY-ST-ZIP	SS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRES CITY-ST-ZIP	S	
12. I hereby certify that the			lify for the exemption st	ated in Section 119.07(3)(i), Florida Sta	

certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(I), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

DANIEL P COOK

1/24/05

904 543-0303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #