PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Kathorine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **S61832** 1. Corporation Name COOK'S CUSTOM SERVICE, INC.

COOKS	CUSTOM SERVICE, INC.										
Principal Place of Business Mailing Address						ļ					
COOK'S CUSTOM SVC INC			COOK'S CUSTOM SVC INC				•				
902 CCS ST			802 CCS ST FT WALTON BCH FL 32547				DO NOT WRITE IN THIS SPACE				
FORT WALTON BCH FL 32547 US			US				3. Date Incorporated or Qualifed				
US		-	•			1	06/24/1991				
2. Principal Pi	ace of Business	2a.	Mailing Address				4. FEI Number		Apr	olied For	
21		26					59-3077241		Not	Applicable	
Suite, Apt. #, etc.		1	Sulte, Apt. #, etc.				5. Certificate of Status Desired [ב	\$8.75 A		
22		27		_			o. Control of States Besides		Fee Red	quired	
City & State	В		City & State				6. Election Campaign Financing	3	\$5.00		
23		28					Trust Fund Contribution		Added to	Fees	
Zip	Country		Zip	Coun	try		8. This corporation owes the current				
24	25	29		30			Personal Property Tax.				
	9. Name and Address of Curren	nt Regis	stered Agent		NAT AL		10. Name and Address of New Reg	IZGIRO M	gent		
coo	K. ROGER				Name						
	WILLIAMS ST			Ī	32 Street	Addres	ss (P.O. Box Number is Not Acceptable)			
	ALTON BEACH FL 32547			<u> </u>	33						
F 1 11	ALTON BEAUTI I'L 32547			l'	53						
				ļī	34 City		-	FL	85 Zip C	ode	I
			202 4000 51-44- 61-44				ation submits this statement for the ou		anging its	registered	
office or re agent. I a	egistered agent, or both, in the State m familiar with, end accept the ebigs	of Flori	da. Such change was au f, Section 607.0505, Flor	ida Statut	es.	Craucri	3 Dodie of Gilectors. Provedy accept to			jistered	
ALCOHATURE.											
SIGNATURE		<u></u>	Marie (MOTE)		SIDE UT			3/11 / 9 DATE	Z	{	=
	Signature, typed or printed frame of registered age						Applitions/CHANGES TO OFFIC	DATE			(98)
12.	OFFICERS AN			Registered A	gent eignature r		rhan reinstating)	DATE ERS AND		RS IN 12	(11/98)
12.	P OFFICERS AN		CTORS	Registered A	gent signature r E		rhan reinstating)	DATE ERS AND	DIRECTO		34 (11/98)
12. TITLE NAME	P COOK, ROGER		CTORS	13. 1,1 TITL 1,2 NAM	gent signature r E		rhan reinstating)	DATE ERS AND	DIRECTO		E034 (11/98)
12. TITLE NAME STREET ADDRESS	P COOK, ROGER 504 WILLIAMS ST		CTORS	13. 1.1 TITL 1.2 NAA 1.3 STR	gent aignature r E E EET ADDRESS		rhan reinstating)	DATE ERS AND	DIRECTO		R2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOK, ROGER 504 WILLIAMS ST FT WALTON BEACH FL 32547		CTORS	13. 1.1 TITL 1.2 NAA 1.3 STR	gent eignature r E IE EET ADDRESS r-ST-ZIP		rhan reinstating)	ERS AND	DIRECTO		CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P COOK, ROGER 504 WILLIAMS ST FT WALTON BEACH FL 32547 VP		ECTORS DELETE	13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITY	gent signature / E E E EET ADDRESS (-ST-ZP)		rhan reinstating)	ERS AND	DIRECTOR	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P COOK, ROGER 504 WILLIAMS ST FT WALTON BEACH FL 32547 VP CANNON, THOMAS SR		ECTORS DELETE	13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITL 2.1 TITL	E E EET ADDRESS 7-ST-ZP E		rhan reinstating)	ERS AND	DIRECTOR	Addition	CR2E034 (11/98)
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P COOK, ROGER 504 WILLIAMS ST FT WALTON BEACH FL 32547 VP CANNON, THOMAS SR 110 DAVID ST. APT. 3D		ECTORS DELETE	13. 1.1 TITL 1.2 NAA 1.3 STR 1.4 CITA 2.1 TITL 2.2 NAA 2.3 STR	gent signature / E E E EET ADDRESS (-ST-ZP)		rhan reinstating)	ERS AND	DIRECTOR	Addition	CR2E034 (11/98)
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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 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 changed, or on-en-attachment with an address, with all other like empowered.

8.4 CITY-ST-ZIP

SIGNATURE: _

FILED

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90083 009 ***150.00