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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 274629

HOWARD COOK - GENERAL CONTRACTOR, INC.

Principal Place of Business 3201 TUXEDO AVE WEST PALM BEACH FL 33405

Mailing Address

3201 TUXEDO AVE

FILED Apr 17 1998 8:00am Secretary of State



WEST PALM BEACH FL 33405 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/11/1963 2a, Mailing Address 4. FEI Number 2, Principal Place of Business Applied For 59-1022403 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes Yes □ Ňo 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COOK, H. GARY 3201 TUXEDO AVENUE Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33405 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the

office or re agent I a	egistered agent, or both, in the State of Florida. Such chang in familiar with, and accept the obligations of, Section 607.05	e was authorized by the corpora 505, Florida Statutes.	ation's board of directors. I hereby accept the appointment as regist	tered
SIGNATURE				
	Signature, typod or printed name of registured agent and title if applicable	(NOTE Registered Agent signature requ		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	PTD DELE	TE 1.1 TITLE	Change	Addition
NAME	COOK, H. GARY	1.2 NAME		
STREET ADDRESS	3201 TUXEDO AVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY - ST - ZIP		
TITLE	SD DELE	TE 2.1 TITLE	Change	Addition
NAME	COOK, JANET M.	2.2 NAME		
STREET ADDRESS	3201 TUXEDO AVE	2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL	2 4 CITY-ST-ZIP		
TITLE	☐ DELE	TE 31 TITLE	☐ Change ☐	Additio
NAME		32 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELE	TE 4.1 TITLE	☐ Change ☐	Additio
NAME (4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CiTY-ST-ZiP		
TITLE	DELE	TE 5.1 TITLE	Change	Additio
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP		
TITLE	DELE	TE 6.1 TITLE	☐ Change ☐ 2	Addition
NAME		6 2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-S1-2IP		6.4 CITY - ST - ZIP		

14. Thereby 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 open samples of the corporation of the receiver of the

SIGNATURE:

4/13/98 (561)687-4813