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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 576717

1. Corporation Name

Principal Place of Business

**COOK CONTRACTING CO** 

13130 SW 83RI MIAMI FL 3315	AVE 1313U SW 83RU AVE MIAMI FL 33156							
INITAL JUIJ	v	MIAMM IL GOTTO			DO NOT WRITE IN THIS SPACE			
	•				3. Date Incorporate 06/23/1978	ed or Qualifed		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Api	plied For
21		26		•	59-1970282		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				. Desired [	\$8.75 A	dditional
22		27		5. Certifcate of Sta	tus Desired	Fee Re	quired	
City & Stat	e	City & State			6. Election Campai	on Financing	\$5.00	May Be
23		28			Trust Fund Cont	ribution	Added to	
Zip	Country	Zip	Country	,	8. This corporation	owes the current year	Intangible	
25 29 30			0	Personal Property Tax.			No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Add	ress of New Register	ed Agent	
	L D TERROY		81	Name				}
	OK, R TERRY		82	Street Add	tress (P.O. Box Number	is Not Acceptable)		
	30 SW 83RD AVE		-	Ou con rida				
MIAI	WI FL 33156		83		•			
			84	City		<del></del>	85 Zip C	`ode
	•		04	City		F	<b>:L</b>   3   2   5	,008
SIGNATURE	Signature, typed or printed name of registered age			nt signature requir	red when reinstating)	DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHA	NGES TO OFFICERS		
TITLE	SD	☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME	COOK, LEE		1.2 NAME					
STREET ADDRESS	13188 SW 91ST PLACE <		1.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP				
TITLE	PTD	. DELETE	2.1 TITLE			•	☐ Change	Addition
NAME	COOK, R TERRY	•	2.2 NAME					١ - ١
STREET ADDRESS	- 13130 SW-83RD AVE		`2.3 STREE	TADDRESS			•	·
CITY-ST-ZIP	MIAMI FL		2.4 CITY-5	ST-ZIP		·		
TITLE	VD	☐ DELETE	3.1 TITLE			,	☐ Change	☐ Addition
NAME	COOK, ROBERT A		3.2 NAME	-				1
STREET ADDRESS	13188 SW 91ST PLACE			TADORESS		•	•	
CITY-ST-ZIP	MIAMI FL	Contest	3.4. CITY-S	ST-ZIP			☐ Change	Addition
TITLE		☐ DELETE	4.1 TITLE .			·	☐ Cilarige	
NAME			4.2 NAME	-				1
STREET ADDRESS				TADDRESS			•	
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-S	T-ZIP	<del></del>	<u>.</u>	Change	Addition
TITLE			5.1 TITLE 5.2 NAME		× .			
NAME				T ADDRESS		* ·	.*	,
STREET ADDRESS			5.4 CITY-S	1				
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				Change	Addition
TITLE			6.2 NAME			,		
NAME.				TADORESS		•	:	

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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

ASIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 APR 1999

Daytime Phone #

May 03, 1999 8:00 am Secretary of State

05-03-1999 90116 045 \*\*\*150.00

RSE034 (11/98)