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

PROFIT CORPORATION ANNUAL REPORT

1998



FEORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(4)

DOCUMENT # WE'RE COOKING NOW, INC.

Feb 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				1 1684 HIL BEGIN LAND BRICK BRICK HING HINE HAVE BEEN I	BIBIT BIBIT BIBIT BIBIT FABI
C/O FENNER		% FENNER			
106 TAINE MTN RD		106 TAINE MTN RD		DO NOT WRITE IN T	IIC CDAOE
BURLINGTON CT 06013 US		BURLINGTON CT 06013 US		DO NOT WRITE IN TH	IIS SPACE
US		03		3. Date Incorporated or Qualified	
9 Principal Di	ace of Business	2a. Mailing Address		04/26/1984 4. FEI Number	
·	ace of flusiness				Applied For Not Applicable
Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		59-2431096	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	-	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29 3	_	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current	L	<u>-, </u>	10. Name and Address of New Register	ed Agent
FII	MER, WILLIAM A		81 Name		
	10 TEMPLE GROVE		82 Street Addr	room (D.O. Boy Number in Not Acceptable)	
· ·	NTER PARK FL 32789		62 Street Addr	ress (P.O. Box Number is Not Acceptable)	
47,00	TIENT FRANCE DE FOO		83		
			84 City		EL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607 0502	and 607.1508 Florida Statutes	the above-named corp		
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Horida, Such change was aut	Inorized by the corporat	poration submits this statement for the purpos tion's board of directors. I hereby accept the	appointment as registered
-5	m tamiliar with, and accept the obliga	mons of, Section 607,0505, Piori	oa Staidies.		
SIGNATURE:	Signature, typed or product can read negational ages	the triber sout ribe (NOTE)	Registered Agent signature requir	red when reinstating) DA1	TE I
12.	OFFICERS AND		I 13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DT	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FENNER, JAMES H.		1.2 NAME		
STREET ADDRESS	108 TAINE MTN RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	BURLINGTON CT		1.4 CITY-ST-ZIP		
TIFLE	DVP	DELETE	2.1 1ITLE	, , , , , , , , , , , , , , , , , , , 	Change Addition
NAME	ELMER, WILLIAM	-	2.2 NAME		
STREET ADDRESS	1010 TEMPLE GROVE		2.3 STREET ADDRESS		
CITY-S1-ZIP	WINTER PARK FL		2. 4 CITY-ST-ZIP		
TITLE	DS	DECETE	31 TITLE		Change Addition
NAME	WAGNER, RUTH		3 2 NAME		
STREET ADDRESS	100 OAKLEIGH DR.		3.3 STREET ADDRESS		
CITY-S1-ZIP	MAITLAND FL		3.4. CITY-ST-ZIP		
TITLE	DP	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SCHENCK, JAY		4. 2 NAME		_ _
STREET ADDRESS	4161 JOHN YOUNG PKWY		4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		4.4 City-St-ZiP		
TITLE	WIND HILV I &	DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
			5.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
		EJ been	6.2 NAME		
NAME expect approve					
STREET ADDRESS			6.3 STREET ADDRESS		
CITY+ST-ZIP			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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address.

160-673643