2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # J48826** 1. Entity Name THE DUMMEN COOKID INC

FILED Jan 12, 2000 8:00 am Secretary of State

THE RUMMEL GROUP, INC.						01-12-2000 90081 037 ***150.00					
Principal Place	e of Business	Mailing Address									
641 1ST AVE N SAINT PETERSBURG FL 33713 IS		PO BOX 13088 ST PETERSBURG FL 33733-3088 US									
O Dringing Di	non of Business	3. Mailing Address		***	_						
2. Principal Place of Business		3. Walling Address					#### i### I	1818 BITT BIBLI 811			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					DO NOT W	RITE IN THIS	SPACE		
City & State		City & State			4. F	El Number	59-27507	87		oplied For ot Applicable	
Zip	ip Country Zip		Country			Certificate of	Status Desired	ı 🗆	\$8.75 Ad Fee Require	ditional ed	
-	6. Name and Address of Current Re	egistered Agent		-	7. N	lame and A	ddress of New	Registered			
				Name							
1641	MEL, H.E. 1ST AVE N			Street Address (P.O. Box Number is Not Acceptable)							
SAIN	T PETERSBURG FL 33713										
			(City				FL	Zip Cod	le	
8. The above	named entity submits this statement for t	he purpose of changing its	registered	office or regi	istered age	ent, or both,	in the State of	Florida.			
SIGNATURE _		Aloy	T. D. slataged As	gent signature rec	wired when re	instating)		DATE			
	Signature, typed or printed name of registered agent and				duied when te	instating)					
	ration is eligible to satisfy its Intangible equirement and elects to do so. a on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.0 Make Check Payable to Department of \$					ion Campaign Fund Contribu			00 May Be d to Fees	
11.	OFFICERS AND DI	RECTORS	12.		AD	DITIONS/CI	HANGES TO C	FFICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RUMMEL, H. E. P O BOX 13088 ST PETERSBURG FL 33733	☐ Delete	TITLE NAME STREET A CITY-ST						☐ Change	☐ Addition	
TITLE	DST	☐ Delete	TITLE				<u>-</u>		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	NICHOLS, KATE 1682 OCEANVIEW DR TIERRA VERDE FL		NAME STREET A CITY-ST	ADDRESS - ZIP				-			
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET A	AODRESS					☐ Change	. Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME	ADDRESS	_	·	J. 1. 7		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME	ADDRESS			*		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP	.1	☐ Delete	TITLE NAME STREET A CITY-ST	ADDRESS - ZIP					☐ Change	☐ Addition	
indicated of the corp	ertify that the information supplied with the on this report or supplemental report is the oration or the receiver or trustee empower or on an attachment with an address, with	rue and accurate and that r rered to execute this report	ny signaturi as required	e shall have.	the same I	iegal effect a	as it made und	er oath: that I	am an office	r or airector	

SIGNATURE:

H.E. Rummel, President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

1-5-2000

727-895-7804