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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M63620 1. Corporation Name

COGO CORP.

Mailing Address

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90201 036 \*\*\*150.00



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3120 MUNROE DR. 3120 MUNROE DR.						
COCONUT GROVE FL 33133 COCONUT GROVE FL 33133			133		70 MAT 140 MAT 140 MAT 140 MAT 1	05
					DO NOT WRITE IN THIS SPA	CE
					3. Date Incorporated or Qualifed	
_	·		···		12/14/1987 —	a service of
2. Principal Place of Business 2a, Mailing Address					4. FEI Number	Applied For
21	26				65-0017344	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				_ \$	B.75 Additional	
22 27					5. Certifcate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	5.00 May Be
	¬,					Added to Fees
Zip			Countr		8. This corporation owes the current year Intangit	
<b>─</b> '				Personal Property Tax.		
24	25	[29]	30	<del></del>	10. Name and Address of New Registered Ager	
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Registered Age.	<u> </u>
FI 0	DIDA DECICTEDED ACENTO IN	ic.	(*)	Name		
FLORIDA REGISTERED AGENTS, INC.				82 Street Address (P.O. Box Number is Not Acceptable)		
100 SE 2ND ST., 36TH FLOOR				_		
MIAI	MI FL 33131		83			
						7in Codo
			84	City	FL  85	Zip Code
	<del></del>		- 45			aina ite registered
office or r agent. I a	registered agent, or both, in the Stat im familiar with, and accept the oblig	te of Florida. Such change was gations of, Section 607.0505, F	authorized by Iorida Statute	the corporations.	poration submits this statement for the purpose of char lon's board of directors. I hereby accept the appointme	nt as registered
SIGNATURE			•			
	Signature, typed or printed name of registered ag	<u> </u>		ent signature require		DEGEORGE IN 12
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	
TITLE	DPST	☐ DELETE	1.1 TITLE	j	Ц	Change
NAME	HARRISON, JOSEPH R		1.2 NAME			
STREET ADDRESS	3120 MUNROE DR.		1.3 STREE	T ADDRESS	_	
CITY-ST-ZIP	COCONUT GROVE FL		1.4 CITY-	ST-21P		
TITLE	V	☐ DELETE	2,1 TITLE			Change
	HARRISON, JAMES	<del>-</del>	. 2.2 NAME			
NAME		. Egyptished				,
STREET ADDRESS	<i>l</i> .			ET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		2. 4 CITY-	ST-ZIP		Change Addition
TITLE	V	☐ DELETE	3.1 TITLE		• ⊔	onange LI Audition
NAME	HARRISON, CATHERINE		3.2 NAME			
STREET ADDRESS	3120 MUNROE DR		3.3 STREE	ET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE FL		3.4. CiTY-	ST-ZiP		
TITLE		☐ ĐELETE	4.1 TITLE		. 🔲	Change
		_	4, 2 NAME			
NAME	[			- 1		
STREET ADDRESS				ET ADDRÉSS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		Ob
TITLE	)	☐ DELETE	5.1 TITLE	)		Change
NAME	j		5.2 NAME		•	
STREET ADDRESS	.]		5.3 STRE	ET ADDRESS		
CITY-ST-ZIP	1		5.4 CITY-	CT. 710		
TITLE 1,					•	
I DOLE NO. 1		☐ DCI CTC				Change [] Addition
,		DELETE	6.1 TITLE			Change Addition
NAME	THE PROPERTY OF THE PARTY OF	<del>-</del>	6.1 TITLE 6.2 NAME			Change
,	The state of the s	<del>-</del>	6.1 TITLE 6.2 NAME			Change

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 of suppliemental annual report is problemental annua

**SIGNATURE:** 

4/8/99

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