2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

FILED DOCUMENT # P00000103602 Feb 16, 2005 08:00 AM 1. Entity Name **Secretary of State** COOK COMMERCIAL REALTY, INC. Principal Place of Business Mailing Address 2635 WEST 81 STREET STE 1 2635 WEST 81 STREET STE 1 HIALEAH FL 33016 HIALEAH FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 65-1052994 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COOK, DANIEL P 17784 SW 12 STREET Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33029 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition TITLE Change Delete TITLE NAME COOK, DANIEL P NAME U00000232341 STREET ADDRESS 2635 WEST 81 STREET STE 1 STREET ADDRESS 02/16/05-80071-005 150.00 CITY-ST-71P CITY ST-ZIP HIALEAH FL 33016 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY ST-ZIP TITLE ☐ Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY- ST- 7(P Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change Addition TITLE TITLE ☐ Detete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CUTY-ST-7iP CITY - ST - ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other, like empowered.