

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 03, 2004 8:00 am
Secretary of State

06-03-2004 90003 048 ***150.00

DOCUMENT # P01000055951

1. Entity Name

TIMOTHY CROOKS, INC.



Principal Place of Business

**817 N. FED HWY.
FORT LAUDERDALE FL 33304**

Mailing Address

**1410 NE 10 AVE. #3
FORT LAUDERDALE FL 33304**

54056535



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1129580**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CROOKS, TIMOTHY
1716 N.E. 15TH AVE.
FT. LAUDERDALE FL 33305**

Name **Timothy Crooks**

Street Address (P.O. Box Number is Not Acceptable)

1410 NE 10 AVE #3

City

Ft. Lauderdale

FL

Zip Code

33304

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
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete
NAME **CROOKS, TIMOTHY**
STREET ADDRESS **1716 N.E. 15TH AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33305**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1410 NE 10 AVE #3**
CITY-ST-ZIP **Ft. Lauderdale FL 33304**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/04 954-779-7966

Date

Daytime Phone #

Attachment 57056535
#101000055951

TIMOTHY CROOKS
1410 N. E. 10 AVE #4
FT LAUD. FL 33307

JUNE 1, 2004-

TO WHOM IT MAY CONCERN:

PLEASE EXCUSE MY LATENESS.

I SINCERELY THOUGHT THIS CHECK NEEDED
TO BE SUBMITTED NO LATER THAN JUNE 1.

I DIDN'T REALIZE MY MISTAKE UNTIL I
WENT THROUGH MY BILLS TO GO OUT
TODAY.

I AM ENCLOSEING A CHECK FOR \$150.00.

PLEASE LET ME KNOW IF I'M STILL ACCOUNTABLE
FOR THE LATE FEE.

SINCERELY

TIMOTHY F. CROOKS
