2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 31, 2006 08:00 AM **Secretary of State** DOCUMENT # P03000006013 1. Entity Name COOK&BROTHER.SUC.INC. Principal Place of Business Mailing Address 2901 AVE. J. 2901 AVE. J. FORT PIERCE FL 34947 FORT PIERCE FL 34947 3. Mailing Address Principal Place of Business 2401 AVE J Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Α, City & State City & State 4. FEI Number Applied For 01-0589355 Not Applie: Country U.S.A \$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, DAVID Street Address (P.O. Box Number is Not Acceptable) 2901 AVE. J. APT, A FORT PIERCE FL 34947 City 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 acceptable the obligations of registered agent. SIGNATURE Signature typed or prime of name of registered agent and title it applicable (NOTE Registered Agent signature rectuired when reinstaling) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May & After May 1, 2006 Fee Will Be \$550.00 . Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIFLE PCEO Delete HILE ☐ Change NAME COOK, DAVID L NAME STREET ADDRESS STREET ADDRESS A TYA L BVA 108S CITY-ST-ZIP FORT PIERCE FL 34947 CITY-ST-ZIP ☐ Change Addition Delete TITLE THE U00000486451 beadal: NAME. 04/13/06-80038-022 150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Delcte Change ☐ Addition ☐ NAME NAME STREET ADDRESS STREET ADDRESS ETTY-ST-ZTP CHY-ST-ZW Defete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP EITY-ST-ZIP 3131.8 Delete 3132 E Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME STRELT ADDRESS STREET ADDRESS CCCY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Section 119, 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.

OOK

lavid

SIGNATURE:

FILED

03-27-06 771-466-6726.