## 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 # **P94000034591**1. Corporation Name

HIGH HOOK, INC.

Principal Place	e of Business	Mailing Address	Mailing Address		1 (8812881 318 1811) 81811 88111 88111 88	1188 (1111 <b>8188</b> ) <b>8</b> 1118 (	18181 1181 1881	
9930 NW 59TH COURT PARKLAND FL 33076		9930 NW 59TH COURT PARKLAND FL 33076		,				
US US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		1	
					05/09/1994			
Principal Place of Business     2a. Mailing Address					4. FEI Number	Ap	plied For	
21	26			65-0488514	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	ie	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added to	o Fees	
Zip	Country Zip 25 29		Country		8. This corporation owes the current year Intangible Personal Property Tax.   ☐ No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
				Name				
POVEROMO, GEORGE A 9930 NW 59TH COURT			82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
PARKLAND FL 33076			83	<u></u>				
						<del></del>		
			84	City	F	<b>85</b> Zip C	Code	
agent. I a	m familiar with, and accept the oblig-	ations of, Section 607.0505, Florida and title if applicable. (NOTE: Reg	Statutes		ion's board of directors. I hereby accept the ap			
12.	,	ND DIRECTORS	13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS			
TITLE	P	☐ DELETE 1.1 TI				Change	☐ Addition	
NAME	OTENOMO, GEORGE /1		1.2 NAME		•		ļ	
STREET ADDRESS			1.3 STREET	ADDRESS	•			
CITY-ST-ZIP			1.4 CITY-ST	T-ZIP			- Addisio-	
TITLE		_	2.1 TITLE			Change	☐ Addition	
NAME			2.2 NAME	1			1	
STREET ADDRESS			2.3 STREET		•			
CITY-ST-ZIP			2.4 CITY-S	IT-ZIP		Change	Addition	
TITLE	<del>-</del>		3.1 TITLE 3.2 NAME			Orlange		
NAME			3.3 STREET ADDRESS				-	
STREET ADDRESS	1		3.4. CITY-S			•		
CITY-ST-ZIP		□ DELETE	4.1 TITLE	11-ZIP		☐ Change	Addition	
NAME			4. 2 NAME				}	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CiTY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME			•		
STREET ADDRESS	1		5.3 STREET	ADDRESS			Į	

CITY-ST-ZIP 14. I hereby certify that the information surplied with the 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an initial report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an er or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the co Block 12 or Block 13 if cha address, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Change

Addition

**FILED** 

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90034 013 \*\*\*150.00