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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	OOKS PLUS, INC.	JUU4U79U (5)		
Principal Place of Business Maile		Mailing Address		I INDIVER IN PORT BERLY BOUND ABOUT BOUND ABOUT BOUND ABOUT
3590 NORTH U.S. HIGHWAY 17-92 3		3590 NORTH U.S. HIGHM	/AY 17-92	
SUITE 105		SUITE 105		DO 1107 117 117 117 117 117
LAKE MARY FL 32746		LAKE MARY FL 32746		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 05/26/1994
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		<b>59-3252701</b> Not Applicable
Suite, Apt. #, etc 5		Suite, Apt. #, etc.		SS 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be
23	Constru	28	Co	Trust Fund Contribution Added to Fees
Zip 24	Country	Zsp	Country 30	8. This corporation owes or has paid the current year Intangible
[47]	9. Name and Address of Curre	29 ent Registered Agent	[30]	Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
CF	RNI, MICHAEL A		81 Name	
	22 WINNEBAGO TRAIL		62 Stree	Address (D.O. D., N., alex in N.)
FERN PARK FL 32730			62 3000	et Address (P.O. Box Number is Not Acceptable)
			83	
			84 City	85 Zip Code
				FL
11. Pursuant office or ragent 1 a	to the provisions of Sections 607.05 registered agent, or both, in the Statim familiar with, and accept the obli-	002 and 607.1508, Florida Statute le of Florida Such change was a gations of, Section 607.0505, Flo	es, the above-name authorized by the co orida Statutes.	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE				
12.	Signature, typed or printed name of registered at OUT DUDGE AT	Quint and the of applicable (NOTE NO DIRECTORS	Registered Agent signatu  13.	alure required when renstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Change Addition
NAME	CERNI, BARBARA B.		1.2 NAME	
STREET ADDRESS	2222 WINNEBAGO TRAIL		1.3 STREET ADDRESS	ss
CITY-ST-ZIP	FERN PARK FL		1.4 CITY-ST-ZIP	•
TITLE	VTS	DELETE	2.1 TITLE	Change Addition
NAME	CERNI, MICHAEL A.		2.2 NAME	
STREET ADDRESS	2222 WINNEBAGO TRAIL		2.3 STREET ADDRESS	ss .
CITY - ST - ZIP	FERN PARK FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	SS
CITY-ST-ZIP		Drutt	3 4. CITY-ST-ZIP	
TITLE		☐ DETELE	4.1 TITLE	Change Addition
NAME STREET ANNOUSES			4. 2 NAME	
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ADDRESS	)55
TITLE		DELETE	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
NAME		vection	5.2 NAME	C Change C Addition
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	~
TITLE		DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME		_	6 2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	ss
OITY PT JIB				

14. I hereby certify that the information sindicated on this annual report or sylofficer or director of the corporation Block 12 or Block 13 if changed by qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an way and to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

to 7/249-9UIL

Feb 11 1998 8:00am

Secretary of State