

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000064499 (3)**

1. Corporation Name

HOOKEE PAINTING, INC.

Principal Place of Business

**1719 SOUTHWEST 21ST TERRACE
MIAMI FL 33145**

Mailing Address

**1719 SOUTHWEST 21ST TERRACE
MIAMI FL 33145**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MITTELBERG, BARRY S
6208 W. COMMERCIAL BLVD.
SUITE 2
FORT LAUDERDALE FL 33319**

3. Date Incorporated or Qualified

08/21/1995

3a. Date of Last Report

4. FEI Number

65-0605065

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes

☐

No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person or persons authorized to sign this report

Signature of person or persons authorized to sign this report

Date

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

HOOKEE, MATT

STREET ADDRESS

1719 SOUTHWEST 21ST TERRACE

CITY- ST- ZIP

MIAMI FL 33145

☐ DELETE

TITLE

STD

NAME

HOOKEE, KARRIE

STREET ADDRESS

1719 SOUTHWEST 21ST TERRACE

CITY- ST- ZIP

MIAMI FL 33145

☐ DELETE

TITLE

VO

NAME

STEPHENS, SAMUEL

STREET ADDRESS

1719 SOUTHWEST 21ST TERRACE

CITY- ST- ZIP

MIAMI FL 33145

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

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STREET ADDRESS

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TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

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SIGNATURE:

Matt Hooker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY- ST- ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY- ST- ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY- ST- ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY- ST- ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY- ST- ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY- ST- ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY- ST- ZIP

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