Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000024296**1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

A PLACE FOR COOKS, INC.

Principal Place of Business	Mailing Address
1447 S. FORT HARRISON AVE. CLEARWATER FL 33756 US	1447 S. FORT HARRISON AVE CLEARWATER FL 33756 US

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90038 028 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

03/14/1996 4. FEI Number

59-3371699

9. Name and Address of Current Registered Agent DINOCOLA, THOMAS 1447 S. FORT HARRISON AVE. CLEARWATER FL 33756 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the deligations of, Section 607.508, Florida Statutes, the above-named corporations submits this statement for the purpose of changing its registered agent, and the first of the corporations board of directors. I hereby accept the approximent as registered agent, and the first of the corporations board of directors. I hereby accept the approximent as registered agent, and the first of the corporations board of directors. I hereby accept the approximent as registered agent, and the corporation submits this statement for the purpose of changing its registered agent, and the corporations board of directors. I hereby accept the approximent as registered agent, and the corporation submits this statement for the purpose of changing its registered agent and the corporations board of directors. I hereby accept the approximent as registered agent and the corporations board of directors. I hereby accept the approximent as registered agent and the corporations board of directors. I hereby accept the approximent as registered agent and the corporations board of directors. I hereby accept the approximent as registered agent and the corporations are provided agent and the corporations. 12.	Zip		Country	Ĺ	2. (P		Country			8. This corporation owes the cu	nem year me			
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144 S. F. FURT HARRISON AVE. CLEARWATER FL 33756 83 84 City FL 85 Zip Code 11. Furnauant to the provisions of Sections 607 0592 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, an advance, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and addition of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and addition's statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DINICOLA, THOMAS 147 S. FORT HARRISON AVE. CLEARWATER FL 33756 140 Change Addition DINICOLA, DIANE DINICOLA, DIANE 10. DELETE 11. TITLE 10. Change Addition Addition DINICOLA, DIANE 10. STREET ADDRESS							92	Stroot A	\ ddrace	(B.O. Boy Number is Not Accer	table)			
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SIGNATURE Signature, hyber or printed name of implatered agent and title if applicable. (NOTE: Registered Agent signature required when ministating) DATE	office or r	egistered ag	ent, or both, in the State of	Flori	ida.Such change was :	autho	rized by	the corpo	ration's	board of directors. I hereby acc	ept the appoir	itment a	as reg	istered
Signature, typed or printed name of registered agent and title of applications. (NOTE: Registered Agent and remorated when reinstating) DATE	agent. I a	ım familiar wi	th, and accept the obligatio	ns o	t, Section 607.0505, Fi	onda	Statutes	•						
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Country

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 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 12 or Block 13 if changed, or on an attachment with an address with all other the

SIGNATURE: