

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

FILED
Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra P. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

MOOKIE ENTERPRISES, INC.

99600006042

Principal Place of Business

THE DANCE CENTRE
OF BOCA RATON

Mailing Address

664 GLADES RD.
BOCA RATON, FL
33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8/16/96

4. FEI Number

65-0689048

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☒ Yes

☐ No

2. Principal Place of Business

21 THE DANCE CENTRE

Suite, Apt. #, etc.

26. Mailing Address

26 664 GLADES RD

Suite, Apt. #, etc.

City & State

23 BOCA RATON, FL

City & State

28

Zip

24 33431

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

STACEY WHITE
370 LAVERS CIR #266
DELRAY BCH, FL 33444

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 607.1508 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

STACEY L. WHITE - PRESIDENT

1/16/98

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME STACEY WHITE
STREET ADDRESS 370 LAVERS CIR #266
CITY-ST-ZIP DELRAY BCH, FL 33444

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this 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 summary 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 637, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STACEY L. WHITE 1/16/98 561-276-6401

CR2E034 (10/97)