## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Oct 07 1998 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000075247 (2)

COTCO CORP.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

						_{	-	
Principal Place of <b>Busi</b> ness Mailing Address				r radicides ten belief dette dater dater dette			ans a <b>nd a</b> n anisa scall minut thet edge	
	akland park blvd.	1100 WEST OAKLAND PA						
WILTON MANO	ORS FL 33311	WILTON MANORS FL 33	WILTON MANORS FL 33311			DO NOT MIDITE IN TO	NO ADAGE	
1						DO NOT WRITE IN TH	IIS SPACE	
İ						•		
2. Principal F	Place of Business	2a. Mailing Address				09/09/1996 4. FEI Number	Applied For	
21	1000 01 00011000	ļ — <b>"</b>	26			65-0699495	Applied For Not Applicable	
Suite, Apt	#, etc.		Suite, Apt. #, etc.				\$8.75 Additional	
22		_ <b></b>	27			5. Certificate of Status Desired	Fee Required	
City & Sta	te	City & State	h			6. Election Campaign Financing	\$5.00 May Be	
23		28	28			Trust Fund Contribution	Added to Fees	
Zip	Country Zip		Country			8. This corporation owes or has paid the o		
24	25	29	30			Personal Property Tax due June 30.	Yes No	
ļ	9. Name and Address of Curren	nt Registered Agent		81		10. Name and Address of New Registere	d Agent	
COTTEC, MICHAEL					Name			
1100 WEST OAKLAND PARK BLVD.				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
WILTON MANORS FL 33311								
				83				
				84	City		85 Zip Code	
						etion submits this statement for the purpose of		
SIGNATURE	Y 2// 2.7. V/(-	ettee				in's board of directors. I hereby accept the app 9-29  red when reinstating)  DATE	-98	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE			1.170	1.1 TITLE			Change Addition	
NAME	COTTEC, MICHAEL		1.2 NAME				7	
STREET ADDRESS	1100 WEST OAKLAND PARK B	LVD.	1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	WILTON MANORS FL 33311	···	1.4 CIT	Y-ST-	ZIP			
TITLE	DELETE		2.1 TIT	LE		Change Addition		
NAME			2.2 NA	ME				
STREET ADDRESS			2.3 STR	REETA	ADDRESS			
CITY-ST-ZiP				2.4 CITY-ST-ZIP				
TITLE	C DECEME			3.1 TITLE			Change Addition	
NAME			3.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP				
TITLE		L Dett. Te					L Change Addition	
NAME OTOGET ADDRESS			4.2 NA					
STREET ADDRESS					ADDRESS		•	
CITY-ST-ZIP			4.4 CIT		ZIP			
		☐ DELETE	5.1 TITU				Change Addition	
NAME STOREST ADDRESS			5.2 NAN					
STREET ADDRESS			5.3 STR	EETA	NDDRESS			

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 or an attachment with an address.

6.4 CITY-ST-ZIP

DELETE